Fill in this information to identify your case:					
United States Bankruptcy Court for the: SOUTHERN DISTRICT OF TEXAS					
Case number (if known):	Chapter you are filing under: ✓ Chapter 7 ☐ Chapter 11 ☐ Chapter 12 ☐ Chapter 13				

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together--called a joint case--and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Identify Yourself

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your government-issued picture identification (for example,	Melissa First Name	First Name
	your driver's license or passport).	Ann Middle Name	Middle Name
		Ibanez	
	Bring your picture identification to your meeting	Last Name	Last Name
	with the trustee.	Suffix (Sr., Jr., II, III)	Suffix (Sr., Jr., II, III)
2.	All other names you		
	have used in the last 8 years	First Name	First Name
	Include your married or	Middle Name	Middle Name
	maiden names.	Last Name	Last Name
3.	Only the last 4 digits of		
٠.	your Social Security	$xxx - xx - \underline{9} \underline{1} \underline{2} \underline{3}$	xxx - xx
	number or federal Individual Taxpayer	OR	OR
	Identification number	9xx - xx -	9xx - xx -

(ITIN)

Debtor 1 Melissa Ann Ibanez		Melissa Ann Ibanez	Case number (if known)			
			About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):		
and Er		usiness names nployer	✓ I have not used any business names or EIN	Is. I have not used any business names or EINs.		
	(EIN) y	ification Numbers you have used in est 8 years	Business name	Business name		
	Include	trade names and	Business name	Business name		
	doing b	usiness as names	Business name	Business name		
			EIN	EIN		
			EIN	EIN		
5.	Where	you live		If Debtor 2 lives at a different address:		
			1803 Willow Point Drive Number Street	Number Street		
			Kingwood TX 77339-2356 City State ZIP Code	City State ZIP Code		
			Harris	State ZIF Code		
			County	County		
			If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to you at this mailing address.		
			Number Street	Number Street		
			P.O. Box	P.O. Box		
			City State ZIP Code	City State ZIP Code		
6.		ou are choosing	Check one:	Check one:		
	bankru	strict to file for ptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.		
			I have another reason. Explain. (See 28 U.S.C. § 1408.)	I have another reason. Explain. (See 28 U.S.C. § 1408.)		
Р	art 2:	Tell the Court Abo	out Your Bankruptcy Case			
7.	Bankru		Check one: (For a brief description of each, see N for Bankruptcy (Form 2010)). Also, go to the top c	Notice Required by 11 U.S.C. § 342(b) for Individuals Filing of page 1 and check the appropriate box.		
	are cho under	oosing to file	Chapter 7			
			Chapter 11			
			Chapter 12			
			☐ Chapter 13			

Deb	Melissa Ann Ibanez				Ca	ase nur	nber (if known)	
8.	How you will pay the fee		I will pay the entire fee when I file my petition. Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address.					
			I need to pay the fee in installments. If you choose this option, sign and attach the Application for Individuals to Pay The Filing Fee in Installments (Official Form 103A).					
			By law, a j than 150% fee in insta	judge may, but is % of the official po allments). If you	not required to, waiv	e your to yo ou mus	fee, and may do ur family size an st fill out the App	you are filing for Chapter 7. so only if your income is less d you are unable to pay the lication to Have the Chapter 7
9.	Have you filed for	$\overline{\mathbf{V}}$	No					
	bankruptcy within the last 8 years?		Yes.					
		Dist	rict			When	MM / DD / YYYY	Case number
		Dist	rict			When	MM / DD / YYYY	Case number
		Dist	rict			When	MM / DD / YYYY	Case number
							MM / DD / YYYY	
10.	Are any bankruptcy cases pending or being		No					
	filed by a spouse who is		Yes.					
	not filing this case with you, or by a business	Deb	tor				Relationsh	ip to you
	partner, or by an affiliate?	Dist	rict			When		Case number,
	aiiiiate :						MM / DD / YYYY	if known
		Deb	tor				Relationsh	ip to you
		Dist	rict			When		Case number,
							MM / DD / YYYY	if known
11.	Do you rent your		No. Go	to line 12.				
	residence?		Yes. Has	s your landlord ob	tained an eviction ju	ıdgmen	t against you?	
							•	Against You (Form 101A)

Debtor 1		Melissa Ann Ibanez			Case number (i	if known)		
Pa	art 3:	Report About An	уΒι	ısine	sses You Own as a Sole Proprietor			
12.	-	ı a sole proprietor full- or part-time ss?			Go to Part 4. Name and location of business			
	busines individu separate	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or			Name of business, if any Number Street			
	LLC.							
	sole pro	ave more than one prietorship, use a e sheet and attach it			City Check the appropriate box to describe your business:	State	ZIP Co	de
	to this petition.				Health Care Business (as defined in 11 U.S.C. § Single Asset Real Estate (as defined in 11 U.S.C. § Stockbroker (as defined in 11 U.S.C. § 101(53A) Commodity Broker (as defined in 11 U.S.C. § 10 None of the above	101(27A)) C. § 101(51B))		
13.	Chapter Bankru are you	Are you filing under Chapter 11 of the Bankruptcy Code and are you a <i>small business</i>		set ap	filing under Chapter 11, the court must know whether your propriate deadlines. If you indicate that you are a small that balance sheet, statement of operations, cash-flow statements do not exist, follow the procedure in	ll business del atement, and f	otor, you ederal in	must attach your come tax return
	debtor?	debtor?	$\overline{\mathbf{V}}$	No.	I am not filing under Chapter 11.			
		For a definition of small business debtor, see		No.	I am filing under Chapter 11, but I am NOT a small but the Bankruptcy Code.	siness debtor	accordin	g to the definition in
	11 U.S.C. § 101(51D).	C. § 101(51D).		Yes.	I am filing under Chapter 11 and I am a small busines Bankruptcy Code.	s debtor acco	rding to tl	ne definition in the
Pa	art 4:	Report If You Ow	vn oı	r Hav	e Any Hazardous Property or Any Property	y That Need	ds Imm	ediate Attention
14.	Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety? Or do you own any property that needs immediate attention?			No Yes.	What is the hazard?			
					If immediate attention is needed, why is it needed?			
	perishal livestoc	mple, do you own ble goods, or k that must be fed, or ng that needs urgent			Where is the property? Number Street			
					City		State	ZIP Code

Debtor 1 Melissa Ann Ibanez Case number (if known)

Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling

15. Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

✓ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

	l am not requi	red to	receive	e a b	riefing	abou
_	credit counse	ling be	ecause	of:		

Incapacity. I have a mental illness or a mental deficiency that makes me

deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ **Disability.** My physical disability causes me

to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

П	I am not required to	o receive	a briefing	abou
	credit counseling I			

☐ Incapacity. I have a mental illness or a mental

deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me to be unable to participate in a

briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Debtor 1		Melissa Ann Ibanez				Case number (if known)				
P	art 6:	Answer These C	uesti	ons fo	r Reporting	Purpos	ses			
16.	What k have?	ind of debts do you	16a.	as "ind	_	dividual pr 16b.	sumer debts? Consumer de imarily for a personal, family.		ure defined in 11 U.S.C. § 101(8) usehold purpose."	
			16b. 16c.	money	y for a business No. Go to line 1 Yes. Go to line	s or invest 16c. 17.	iness debts? Business deb ment or through the operation that are not consumer or bu	n of th		
17.	Are vo	u filing under								
	Chapter 7?		No. I	am not filing ur	nder Chap	ter 7. Go to line 18.				
	any exc exclude admini are pai availab	estimate that after empt property is ed and strative expenses d that funds will be lef for distribution ecured creditors?	V	a _	-	-	•	-	xempt property is excluded and to distribute to unsecured creditors?	
18.		any creditors do timate that you		1-49 50-99 100-199 200-999			1,000-5,000 5,001-10,000 10,001-25,000		25,001-50,000 50,001-100,000 More than 100,000	
19.		uch do you te your assets to th?		\$100,00	000 1-\$100,000 01-\$500,000 01-\$1 million		\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million		\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion	
20.		uch do you te your liabilities to		\$100,00	000 -\$100,000 -\$500,000 01-\$1 million		\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million		\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion	

Debtor 1	Melissa Ann Ibanez		Case number (if known)					
Part 7:	Sign Below							
For you		I have examined this petition, and I declare ur and correct.	nder penalty of perjury that the information provided is true					
		•	aware that I may proceed, if eligible, under Chapter 7, 11, 12, stand the relief available under each chapter, and I choose to					
		If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).						
		I request relief in accordance with the chapter	ance with the chapter of title 11, United States Code, specified in this petition.					
I understand making a false statement, concealing property, or obtaining money or proper connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.		in fines up to \$250,000, or imprisonment for up to 20 years,						
		X /s/ Melissa Ann Ibanez Melissa Ann Ibanez, Debtor 1	X Signature of Debtor 2					
		Executed on 04/04/2019 MM / DD / YYYY	Executed on					

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Debtor 1	Melissa Ann Ibanez		Case number (if knowr	n)				
For your attorney, if you are represented by one If you are not represented by an attorney, you do not need to file this page.		I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.						
		X /s/ Jesse Aguinaga Signature of Attorney for Debtor	Date	04/04/2019 MM / DD / YYYY				
		Jesse Aguinaga Printed name Jesse Aguinaga Firm Name 8323 Southwest freeway Suit Number Street	te 670					
		Houston City	TX State	77074 ZIP Code				
		Contact phone (713) 772-7986	Email address jfa@a q	guinagaandassociates.com				
		00798026 Bar number	TX State	_				

F	ill in this inf	ormation to i	dentify your case	and this filing:		
D	ebtor 1	Melissa	Ann	Ibanez		
		First Name	Middle Name	Last Name		
	ebtor 2 Spouse, if filing)	First Name	Middle Name	Last Name	-	
U	nited States Ba	nkruptcy Court fo	or the: SOUTHERN D	ISTRICT OF TEXAS	_	
С	ase number				☐ Check	if this is an
(it	f known)				<u> </u>	ded filing
<u></u>	::::::::::::::::::::::::::::::::::::::	400 A /D				
_	ficial Form					42/
30	nedule A	B: Propert	у			12/1
the filir she	asset in the cang together, bo	ategory where y th are equally re . On the top of a	ou think it fits best. Besponsible for supplyi any additional pages,	e as complete and accurate ng correct information. If m write your name and case n	asset fits in more than one ca as possible. If two married po fore space is needed, attach a umber (if known). Answer eve Estate You Own or Have	eople are separate ery question.
_						
1.	No. Go		ii or equitable interest	in any residence, building,	iand, or similar property?	
		nere is the proper	ty?			
2.			-	of your entries from Part 1, ite that number here		\$0.00
P	art 2: De	scribe Your \	/ehicles			
	-		•		r are registered or not? Includ Executory Contracts and Unexp.	•
3.	Cars, vans, ti	rucks, tractors,	sport utility vehicles,	motorcycles		
	✓ No ☐ Yes					
4.				recreational vehicles, other t, fishing vessels, snowmobile		
	✓ No ☐ Yes					
5.				of your entries from Part 2, ite that number here		\$0.00
P	art 3: De	scribe Your F	Personal and Hous	sehold Items		
				ny of the following items?		Current value of the portion you own? Do not deduct secured claims or exemptions.
6.	Examples: M	oods and furnis ajor appliances, f	hings furniture, linens, china,	kitchenware		
	□ No ☑ Yes. Des			ing Ware\$50, Bedroom F c. Pet Supplies \$20, Livi	urniture\$750, Misc. ng Room Furniture\$1130.	\$2,100.00

Deb	tor 1 M	lelissa Ann Ibanez Cas	se number (if known)
7.	Electronic Examples:	cs : Televisions and radios; audio, video, stereo, and digital equipment; compute music collections; electronic devices including cell phones, cameras, media	•
	□ No ☑ Yes. [Describe 2-TVs\$600, 1-PC\$450, 1 Printer/Scanner \$50, 2-Cell Ph	nones \$500. \$1,600.00
8.		les of value Antiques and figurines; paintings, prints, or other artwork; books, pictures, or stamp, coin, or baseball card collections; other collections, memorabilia, col	•
	□ No ✓ Yes. [Describe Misc. Wall Hangings/Curios/Collectibles/Decorations/	Photos\$575\$575.00
9.		nt for sports and hobbies : Sports, photographic, exercise, and other hobby equipment; bicycles, pool t canoes and kayaks; carpentry tools; musical instruments	ables, golf clubs, skis;
	✓ No ☐ Yes. [Describe	
10.	•	: Pistols, rifles, shotguns, ammunition, and related equipment	
	✓ No ☐ Yes. [Describe	
11.		Everyday clothes, furs, leather coats, designer wear, shoes, accessories	
	☐ No ☑ Yes. [Describe Misc. Clothing \$650, Accessories \$175, and Foowear	\$750. \$1,575.00
12.	Jewelry Examples:	:: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirlo gold, silver	om jewelry, watches, gems,
	□ No ☑ Yes. [Describe Miscl. Jewelry \$450 and 3 Watches \$90.	\$540.00
13.	Non-farm Examples:	animals : Dogs, cats, birds, horses	
	☐ No ✓ Yes. [Describe 1 Household Pet/Cat. \$25.	\$25.00
14.	Any other did not lis	r personal and household items you did not already list, including any he st	ealth aids you
	_	Give specific	
15.		follar value of all of your entries from Part 3, including any entries for pag for Part 3. Write the number here	
Pa	art 4:	Describe Your Financial Assets	
Do y	you own or	r have any legal or equitable interest in any of the following?	Current value of the portion you own? Do not deduct secured claims or exemptions.
16.	Cash Examples:	: Money you have in your wallet, in your home, in a safe deposit box, and on petition	hand when you file your
	✓ No ☐ Yes		Cash:

Debt	or 1 Melissa Ann Ibanez	Case number (if known)	
17.		ther financial accounts; certificates of deposit; shares in credit unions, other similar institutions. If you have multiple accounts with the same	
	□ No ✓ Yes	Institution name:	
	17.1. Checking account:	Wells Fargo Checking account 8113	\$15.99
18.	Bonds, mutual funds, or publicly		
		t accounts with brokerage firms, money market accounts	
	✓ No Yes Institut	ion or issuer name:	
	Non-publicly traded stock and int an interest in an LLC, partnership	terests in incorporated and unincorporated businesses, including o, and joint venture	
	✓ No Yes. Give specific information about		
20		of entity: % of ownership:	
	Negotiable instruments include per	s and other negotiable and non-negotiable instruments sonal checks, cashiers' checks, promissory notes, and money orders. se you cannot transfer to someone by signing or delivering them.	
	✓ No Yes. Give specific information about themIssuer	name:	
21.	Retirement or pension accounts Examples: Interests in IRA, ERISA profit-sharing plans	, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or	
	✓ NoYes. List each account separately. Type of a	account: Institution name:	
		nts ou have made so that you may continue service or use from a company rds, prepaid rent, public utilities (electric, gas, water), telecommunications	
	No No	la attention in one and in dividual.	
23.	Annuities (A contract for a specific	Institution name or individual: c periodic payment of money to you, either for life or for a number of years)	
	☑ No		
24.	Yes Issuer Interests in an education IRA, in a	name and description: an account in a qualified ABLE program, or under a qualified state tuition pr	ogram.
	26 U.S.C. §§ 530(b)(1), 529A(b), ar		
	✓ No ✓ Yes Institut	ion name and description. Separately file the records of any interests. 11 U.S.C	c. § 521(c)
25.	_	sts in property (other than anything listed in line 1), and rights or	
	✓ No✓ Yes. Give specific information about them		
26.		trade secrets, and other intellectual property; websites, proceeds from royalties and licensing agreements	
	✓ No ☐ Yes. Give specific information about them		

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Deb	tor 1	Melissa Ann Ibanez	Case number (if known)	
27.	Exampl No Pes	es, franchises, and other general intangibles es: Building permits, exclusive licenses, cooperative association holdings, li . Give specific rmation about them	iquor licenses, professional licens	ses
Mor	ney or pr	operty owed to you?		Current value of the portion you own? Do not deduct secured claims or exemptions.
28.	Tax ref	unds owed to you		
	abo you	. Give specific information ut them, including whether already filed the returns the tax years	Federal State:	:
	۵۰		Local:	
29.	✓ No	es: Past due or lump sum alimony, spousal support, child support, maintena		settlement
	☐ res	. Give specific information	Alimony:	
			Maintenance: Support:	
			Divorce settlement:	
			Property settlement	
30.	Exampl No	mounts someone owes you es: Unpaid wages, disability insurance payments, disability benefits, sick pa compensation, Social Security benefits; unpaid loans you made to some . Give specific information	y, vacation pay, workers'	
31.	Example No Yes con	s in insurance policies es: Health, disability, or life insurance; health savings account (HSA); credit . Name the insurance apany of each policy list its value		nce rrender or refund value:
32.	If you a	erest in property that is due you from someone who has died e the beneficiary of a living trust, expect proceeds from a life insurance police to receive property because someone has died	cy, or are currently	
	✓ No ☐ Yes	. Give specific information		
33.	Exampl	against third parties, whether or not you have filed a lawsuit or made a es: Accidents, employment disputes, insurance claims, or rights to sue	demand for payment	
	✓ No ☐ Yes	. Describe each claim		
34.		ontingent and unliquidated claims of every nature, including countercla o set off claims	nims of the debtor and	
	✓ No ☐ Yes	. Describe each claim		

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Deb	otor 1	Melissa Ann Ibanez	Case number (if known)	
35.	Any fin	ancial assets you did not already list		
	✓ No ☐ Yes	s. Give specific information		
36.		e dollar value of all of your entries from Part 4, including any entries d for Part 4. Write that number here		\$15.99
Pa	art 5:	Describe Any Business-Related Property You Own or H	lave an Interest In. List any	real estate in Part 1.
37.	_	own or have any legal or equitable interest in any business-related		
*	✓ No.	Go to Part 6. Go to line 38.	Freezes	
				Current value of the portion you own? Do not deduct secured claims or exemptions.
38.	Accour	nts receivable or commissions you already earned		Claims or exemplions.
	✓ No ☐ Yes	s. Describe		
39.		equipment, furnishings, and supplies es: Business-related computers, software, modems, printers, copiers, fa desks, chairs, electronic devices	ıx machines, rugs, telephones,	
	✓ No ☐ Yes	s. Describe		
40.	Machin	ery, fixtures, equipment, supplies you use in business, and tools of	your trade	
	✓ No ☐ Yes	s. Describe		
41.	Invento	ry		
	✓ No ☐ Yes	s. Describe		
42.	Interest	ts in partnerships or joint ventures		
	✓ No ☐ Yes	. Describe Name of entity:	% of ownership:	
43.	Custom	ner lists, mailing lists, or other compilations		
	✓ No ☐ Yes	 Do your lists include personally identifiable information (as define No Yes. Describe 	ed in 11 U.S.C. § 101(41A))?	
44.	Any bu	siness-related property you did not already list		
	✓ No ☐ Yes	s. Give specific information.		
45.		e dollar value of all of your entries from Part 5, including any entries d for Part 5. Write that number here		\$0.00

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Deb	otor 1	Melissa Ann Ibanez Cas	e number (if known)
P		Describe Any Farm- and Commercial Fishing-Related Propert If you own or have an interest in farmland, list it in Part 1.	ty You Own or Have an Interest In.
46.	Do you	own or have any legal or equitable interest in any farm- or commercial fish	ing-related property?
		Go to Part 7. S. Go to line 47.	
			Current value of the portion you own? Do not deduct secured claims or exemptions.
47.	Farm a	nimals les: Livestock, poultry, farm-raised fish	
	✓ No		
48.	Crops-	either growing or harvested	
		s. Give specific ormation	
49.	Farm a	nd fishing equipment, implements, machinery, fixtures, and tools of trade	
	✓ No ☐ Yes	S	
50.	Farm a	nd fishing supplies, chemicals, and feed	
	✓ No ☐ Yes	S	
51.	Any fai	m- and commercial fishing-related property you did not already list	
		s. Give specific	
52.		e dollar value of all of your entries from Part 6, including any entries for paged for Part 6. Write that number here	
P	art 7:	Describe All Property You Own or Have an Interest in That Yo	ou Did Not List Above
53.	•	have other property of any kind you did not already list? les: Season tickets, country club membership	
	✓ No ☐ Yes	s. Give specific information.	
54.	Add the	e dollar value of all of your entries from Part 7. Write that number here	→ \$0.00

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Debtor 1	Melissa Ann Ibanez	Case no	umber (if known)	
Part 8:	List the Totals of Each Part of this Form			
55. Part 1	: Total real estate, line 2		→	\$0.00
56. Part 2	2: Total vehicles, line 5	\$0.00		
57. Part 3	3: Total personal and household items, line 15	\$6,415.00		
58. Part 4	l: Total financial assets, line 36	\$15.99		
59. Part 5	5: Total business-related property, line 45	\$0.00		
60. Part 6	S: Total farm- and fishing-related property, line 52	\$0.00		
61. Part 7	7: Total other property not listed, line 54	+\$0.00		
62. Total	personal property. Add lines 56 through 61	\$6,430.99	Copy personal property total	+ \$6,430.99
63. Total	of all property on Schedule A/B. Add line 55 + line 62			\$6,430.99

	Melissa First Name	Ann Middle Norm	Ibanez			
Debtor 2		Middle Nam				
(Spouse, if filing		Middle Nam		rev.	.e	
	ankrupicy Court for	ine. <u>3001HE</u>	ERN DISTRICT OF 1			Check if this is an amended filing
Case number (if known)						amondou ming
Official Forn	n 106C					
Schedule C	: The Prope	rty You C	laim as Exemp	ot		04/1
Jsing the property pace is needed,	y you listed on Sch	nedule A/B: Prop to this page as r	perty (Official Form 10	6A/B)	as your source, list the	esponsible for supplying correct information e property that you claim as exempt. If more sary. On the top of any additional pages,
s to state a spec exempted up to t eceive certain b exemption of 100	cific dollar amount the amount of any enefits, and tax-e 10% of fair market v	t as exempt. A applicable sta xempt retireme value under a l	Alternatively, you may atutory limit. Some ex ent fundsmay be unl	clair cemp imite mptic	n the full fair market vitionssuch as those d in dollar amount. Fon to a particular doll	you claim. One way of doing so value of the property being for health aids, rights to lowever, if you claim an lar amount and the value of the le statutory amount.
Part 1: Id	entify the Prop	erty You Cl	aim as Exempt			
. Which set of	f exemptions are	you claiming?	Check one only,	even	if your spouse is filing	with you.
<u> </u>			nkruptcy exemptions. U.S.C. § 522(b)(2)	11 U.	S.C. § 522(b)(3)	
	_		hat you claim as exer	npt, f	ill in the information	below.
•	of the property a at lists this proper		Current value of the portion you own		ount of the mption you claim	Specific laws that allow exemption
			Copy the value from Schedule A/B		ck only one box for h exemption	
Bedroom Furni ₋inens/Beddino 320, Living Roo	rvice/Cooking Witure\$750, Misc. g\$150, MIsc. Peom Furniture\$11 claimed for this	t Supplies 30.	\$2,100.00		\$625.00 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(3)
3. Are you clai	-	-	f more than \$170,350			
. Are you clai	-	-	f more than \$170,350? years after that for cas		ed on or after the date	of adjustment.)

Debtor 1	Melissa Ann Ibanez	Case number (if known)			
Part 2:	Additional Page				
	ription of the property and line on A/B that lists this property	Current value of Amount of the the portion you exemption you claim own			Specific laws that allow exemption
		Copy the value from Schedule A/B		eck only one box for th exemption	
Bedroom Linens/Be \$20, Livin (2nd exen	ption: Ile/Service/Cooking Ware\$50, Furniture\$750, Misc. edding\$150, Misc. Pet Supplies g Room Furniture\$1130. Inption claimed for this asset) Schedule A/B: 6	\$2,100.00		\$1,475.00 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(5)
\$50, 2-Cel (1st exem	ption: 0, 1-PC\$450, 1 Printer/Scanner II Phones \$500. ption claimed for this asset) Schedule A/B:7	\$1,600.00		\$0.00 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(3)
\$50, 2-Cel (2nd exen	ption: 0, 1-PC\$450, 1 Printer/Scanner II Phones \$500. nption claimed for this asset) Schedule A/B:7	\$1,600.00		\$0.00 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(5)
Photos\$5	 Curios/Collectibles/Decorations/	\$575.00		\$575.00 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(3)
and Foow (1st exem	thing \$650, Accessories \$175,	\$1,575.00		\$625.00 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(3)
and Foow (2nd exen	thing \$650, Accessories \$175,	\$1,575.00		\$950.00 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(5)
	ption: velry \$450 and 3 Watches \$90. Schedule A/B:12	\$540.00		\$540.00 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(4)
	ption: old Pet/Cat. \$25. Schedule A/B: 13	\$25.00		\$25.00 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(3)

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Debtor 1 Melissa Ann Ibanez		Case number (if known)		
Part 2: Additional Page				
Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption	
	Copy the value from Schedule A/B	Check only one box for each exemption		
Brief description: Wells Fargo Checking account 8113 Line from Schedule A/B:17.1	<u>\$15.99</u>	\$15.99 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(5)	

Debtor 1	Melissa A	\nn	Ibanez			
20210.		liddle Name	Last Name			
Debtor 2 (Spouse, if filing)	First Name N	liddle Name	Last Name	—		
United States Bar	nkruptcy Court for the:	OUTHERN D	ISTRICT OF TEXAS			
Case number					☐ Check if this is	s an
(if known)					amended filing	
Official Form	106D					
Schedule D:	Creditors Who	Have Cla	ims Secured by	Property		12/15
correct information On the top of any 1. Do any credit No. Che	n. If more space is ne additional pages, write ors have claims secur	eded, copy the your name an ed by your pro his form to the o	ed people are filing togo Additional Page, fill it of d case number (if know perty? court with your other sche	out, number the ent	ries, and attach it to thi	s form.
Part 1: Lis	t All Secured Clair	ns				
claim, list the creditor has a	ed claims. If a creditor creditor separately for exparticular claim, list the ible, list the claims in all e.	ach claim. If mo other creditors bhabetical order	ore than one in Part 2. As according to the	Column A Amount of claim Do not deduct the value of collateral	Column B Value of collateral that supports this claim	Column C Unsecured portion If any
2.1		Describe the secures the	property that claim:	\$2,474.00	\$750.00	\$1,724.00
Conn Appliance Creditor's name 3295 College Str Number Street	•	- TV \$300/PC -	\$ \$450			
			e you file, the claim is:	Check all that apply		
Beaumont	TX 77701	Continge				
City	State ZIP Code	Disputed				
Who owes the det Debtor 1 only	ot? Check one.		n. Check all that apply.			
Debtor 2 only			ment you made (such as lien (such as tax lien, m		d car loan)	
Debtor 1 and D	•	☐ Judamer	t lien from a lawsuit			
_	the debtors and anothe	Other (in	cluding a right to offset)			
Check if this of to a community						
Date debt was inc	urred	_ Last 4 digits	of account number			
Add the dollar val	ue of your entries in C	olumn A on thi	s page. Write		٦	
that number here:	•			\$2,474.00	_	
f this is the last p	age of your form, add	he dollar value	totals from		7	

Official Form 106D

all pages. Write that number here:

				•		
Fill in this info	ormation to id	entify your c	ase:			
Debtor 1	Melissa	Ann	Ibanez			
	First Name	Middle Name	Last Name			
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name			
United States Bar	nkruptcy Court for	he: SOUTHER	N DISTRICT OF TEXAS			
Case number (if known)					Check if this is a amended filing	an
Official Form	106E/F					
Schedule E/	F: Creditors	Who Have	Unsecured Claims			12/15
Do not include any If more space is no to this page. On the	y creditors with p eeded, copy the F he top of any add	artially secured Part you need, fi itional pages, w	and on Schedule G: Executory Colclaims that are listed in Schedule II it out, number the entries in the rite your name and case number (secured Claims	D: Creditors Who Hoboxes on the left. At	old Claims Secur	ed by Property.
1. Do any credit	ors have priority	unsecured clain	ns against you?			
☐ No. Go t ☑ Yes.	o Part 2.					
claim. For each show both price more space is	ch claim listed, ide ority and nonpriority	ntify what type of amounts. As m unsecured clair	creditor has more than one priority u claim it is. If a claim has both priori such as possible, list the claims in al ns, fill out the Continuation Page of I	ty and nonpriority amo	ounts, list that clair	m here and or's name. If
(For an explar	nation of each type	of claim, see the	instructions for this form in the instructions	ruction booklet. Total claim	Priority	Nonpriority
					amount	amount
2.1				\$0.00	\$0.00	\$0.00
US Trustee Priority Creditor's Name			Last 4 digits of account number			
Office of the US Number Street	Trustee		When was the debt incurred?		_	
515 Rusk Ave.,			As of the date you file, the claim	is: Check all that app	lv.	
			Contingent		.,.	
Houston		77002 IP Code	Unliquidated Disputed			
City Who incurred the (Type of PRIORITY unsecured cla	im:		
Debtor 1 only			Domestic support obligations			
Debtor 2 only Debtor 1 and D	ehtor 2 only		Taxes and certain other debts	, ,	ent	
At least one of	the debtors and ar	nother	Claims for death or personal in intoxicated	jury while you were		
☐ Check if this c	laim is for a com		Other. Specify			
Is the claim subjec	ct to offset?		Administrative Priority			
Mo ☐ Yes						

Debtor 1 Melissa	a Ann Ibanez	Case number (if known)	
Part 2: List	All of Your NONPRIORI	TY Unsecured Claims	
No. You have Yes 4. List all of your If a creditor has a type of claim it is	nonpriority unsecured claims more than one nonpriority unse s. Do not list claims already inc	d claims against you? t. Submit this form to the court with your other schedules. s in the alphabetical order of the creditor who holds each claim. ecured claim, list the creditor separately for each claim. For each claim lister cluded in Part 1. If more than one creditor holds a particular claim, list the of unsecured claims, fill out the Continuation Page of Part 2.	
4.1 4 Change Energy Nonpriority Creditor's Nar	ne	Last 4 digits of account number 3 9 1 4 When was the debt incurred?	\$0.00
PO Box 660631 Number Street		As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed	
	otor 2 only e debtors and another im is for a community debt	Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Utlity Account	
4.2 500 Fast Cash Nonpriority Creditor's Nar 515 GSE Number Street	ne	Last 4 digits of account number 6 2 0 When was the debt incurred? As of the date you file, the claim is: Check all that apply. Contingent Unliquidated	\$800.00
	otor 2 only e debtors and another im is for a community debt	Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Outstanding Debt	

Debtor 1 Melissa Ann Ibanez	Case number (if known)	
Part 2: Your NONPRIORITY Unsecur	ed Claims Continuation Page	
After listing any entries on this page, number ther previous page.	n sequentially from the	Total claim
4.3		\$1,652.10
ACE Cash Express	Last 4 digits of account number 8 5 8 5	
Nonpriority Creditor's Name 1231 Greenway Drive #600	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
	_	
	Disputed	
Irving TX 75038 City State ZIP Code	Type of NONDRIGRITY upgeoured claims	
Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim: Student loans	
Debtor 1 only	Obligations arising out of a separation agreement or divorce	
Debtor 2 only Debtor 1 and Debtor 2 only	that you did not report as priority claims	
At least one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify	
Check if this claim is for a community debt	Outstanding Debt	
Is the claim subject to offset?	_	
✓ No Yes		
4.4		\$1,489.00
ACS Primary Care Physicians SW, PA	_ Last 4 digits of account number _ 7 _ 5 _ 6 _ 9	
Nonpriority Creditor's Name PO Box 1123	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
	_	
	Disputed	
Minneapolis MN 55440-1123 City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.	Student loans	
Debtor 1 only Debtor 2 only	Obligations arising out of a separation agreement or divorce	
Debtor 1 and Debtor 2 only	that you did not report as priority claims	
At least one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify	
☐ Check if this claim is for a community debt	Medical Service	
Is the claim subject to offset?		
✓ No ☐ Yes		
4.5		\$1,911.00
Aldous & Associates, PLLC	Last 4 digits of account number	
Nonpriority Creditor's Name 4625 South 2300 East,	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
	_	
Hallandari III 04447	Disputed	
Holladay UT 84117 City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.	Student loans	
Debtor 1 only Debtor 2 only	Obligations arising out of a separation agreement or divorce	
Debtor 1 and Debtor 2 only	that you did not report as priority claims	
At least one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify	
☐ Check if this claim is for a community debt	Collecting for - Golds Gym	
Is the claim subject to offset?		
✓ No Yes		

Debtor 1 Melissa Ann Ibanez	Case number (if known)	
Part 2: Your NONPRIORITY Unsecu	red Claims Continuation Page	
After listing any entries on this page, number the previous page.	m sequentially from the	Total claim
4.6		\$1,800.00
American Webloan	Last 4 digits of account number 3 4 2 5	
Nonpriority Creditor's Name 3910 W 6th Avenue #277	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
	_ Contingent	
	☐ Unliquidated ☐ ☐ Disputed	
Stillwater OK 74074		
City State ZIP Code Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	Student loans	
Debtor 2 only	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
Debtor 1 and Debtor 2 only	Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	✓ Other. Specify	
☐ Check if this claim is for a community debt	Outstanding Debt	
Is the claim subject to offset?		
✓ No ☐ Yes		
4.7		\$85.00
AMRE Financial Services	Last 4 digits of account number	
Nonpriority Creditor's Name	When was the debt incurred?	
3075 E. Imipoerial Highway #200 Number Street	As of the date you file, the claim is: Check all that apply.	
	_ ☐ Contingent	
	Unliquidated	
Brea CA 92821	Disputed	
City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.	Student loans	
Debtor 1 only Debtor 2 only	Obligations arising out of a separation agreement or divorce	
Debtor 1 and Debtor 2 only	that you did not report as priority claims	
At least one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify	
Check if this claim is for a community debt	Medical Service	
Is the claim subject to offset?		
☑ No		
Yes		
4.8		CO4 FO
	Last 4 digits of account number 9 1 0 1	\$81.52
AT&T Nonpriority Creditor's Name	Last 4 digits of account number _ <u>9 _1 _0 _1</u> When was the debt incurred?	
PO Box 5014		
Number Street	As of the date you file, the claim is: Check all that apply.	
	Contingent Unliquidated	
- 10	Disputed	
Carol Stream IL 60197 City State ZIP Code	Turns of NONDRIGRITY unaccounted alaims	
Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce	
Debtor 2 only	that you did not report as priority claims	
Debtor 1 and Debtor 2 only At least one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts	
Check if this claim is for a community debt	Other. Specify	
	Outstanding Debt	
Is the claim subject to offset? No		
✓ No Yes		

Debtor 1 Melissa Ann Ibanez	Case number (if known)	
Part 2: Your NONPRIORITY Unsecur	red Claims Continuation Page	
After listing any entries on this page, number ther previous page.	m sequentially from the	Total claim
4.9		\$406.00
AT&T Mobility	Last 4 digits of account number	
Nonpriority Creditor's Name 17000 Dallas Parkway Ste 104	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
	_ Contingent	
	☐ Unliquidated ☐ ☐ Disputed	
Dallas TX 75248 City State ZIP Code		
City State ZIP Code Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce	
Debtor 2 only Debtor 1 and Debtor 2 only	that you did not report as priority claims	
At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
☐ Check if this claim is for a community debt	✓ Other. Specify Outstanding Debt	
Is the claim subject to offset?	Outotalianing Book	
☑ No		
Yes		
4.10		\$1,015.27
Balance Credit	Last 4 digits of account number 3 0 8 9	
Nonpriority Creditor's Name PO Box 4356, Dept. 1557	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
	_ Contingent	
	☐ Unliquidated ☐ Disputed	
Houston TX 77210		
City State ZIP Code Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce	
Debtor 2 only Debtor 1 and Debtor 2 only	that you did not report as priority claims	
At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
☐ Check if this claim is for a community debt	Other. Specify Outstanding Debt Ou	
Is the claim subject to offset?	Outotalianing Book	
☑ No		
Yes		
4.11		\$383.53
Bank of America N.A.	Last 4 digits of account number 5 0 5 1	
Nonpriority Creditor's Name Attn: Recovery Department	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
PO Box 15284	_ Contingent	
	☐ Unliquidated ☐ Disputed	
Wilmington DE 19850		
City State ZIP Code Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce	
Debtor 2 only	that you did not report as priority claims	
Debtor 1 and Debtor 2 only At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
Check if this claim is for a community debt	✓ Other. Specify Bank Overdraft	
Is the claim subject to offset?		
☑ No		
Yes		

Debtor 1 Melissa Ann Ibanez	Case number (if known)	
Part 2: Your NONPRIORITY Unsecur	ed Claims Continuation Page	
After listing any entries on this page, number then previous page.	n sequentially from the	Total claim
4.12		\$455.00
Bank of Missouri/Total Visa	Last 4 digits of account number	
Nonpriority Creditor's Name 5109 S Broadband Lane	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
	Contingent	
	☐ Unliquidated ☐ Disputed	
Sioux Fallas SD 57109		
City State ZIP Code Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce	
Debtor 2 only	that you did not report as priority claims	
Debtor 1 and Debtor 2 only At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
☐ Check if this claim is for a community debt	✓ Other. Specify Credit Card	
Is the claim subject to offset?	orealt said	
✓ No Yes		
4.13		\$1,227.00
Basepoint HM Nonpriority Creditor's Name	Last 4 digits of account number	
3225 Northstar Circle	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
	_	
Levieville TN 27777	Disputed	
Louisville TN 37777 City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.	Student loans	
Debtor 1 only Debtor 2 only	Obligations arising out of a separation agreement or divorce	
Debtor 1 and Debtor 2 only	that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	Other. Specify	
☐ Check if this claim is for a community debt	Collecting for - Memorial Herman Hospital	
Is the claim subject to offset?		
✓ No ☐ Yes		
4.14		\$2,267.00
Bay Area Credit Service	Last 4 digits of account number 9 2 9 7	
Nonpriority Creditor's Name PO Box 467600	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
Atlanta, GQ+A 31146	_	
	Disputed	
City State ZIP Code		
Who incurred the debt? Check one.	Student loans	
Debtor 1 only	Obligations arising out of a separation agreement or divorce	
Debtor 2 only Debtor 1 and Debtor 2 only	that you did not report as priority claims	
At least one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify	
Check if this claim is for a community debt	Collecting for - Compass Point ER Physicians	
Is the claim subject to offset?	•	
No You		
Yes		

Debtor 1 Melissa Ann Ibanez	Case number (if known)	
Part 2: Your NONPRIORITY Unsec	ured Claims Continuation Page	
After listing any entries on this page, number th previous page.	em sequentially from the	Total claim
4.15		\$1,517.66
Cash for Whatever	Last 4 digits of account number	<u> </u>
Nonpriority Creditor's Name	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
	Contingent	
	Unliquidated	
Chicago IL 60646	Disputed	
City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one. Debtor 1 only	☐ Student loans	
Debtor 1 only Debtor 2 only	Obligations arising out of a separation agreement or divorce	
Debtor 1 and Debtor 2 only	that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	Other. Specify	
☐ Check if this claim is for a community debt	Outstanding Debt	
Is the claim subject to offset?		
✓ No Yes		
4.16		\$1,556.90
Cash Net USA	Last 4 digits of account number 0 3 6 6	
Nonpriority Creditor's Name 200 W Jackson Blvd.	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
	Contingent	
	☐ Unliquidated ☐ Disputed	
Chicago IL 60606		
City State ZIP Code Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	Student loans	
Debtor 2 only	 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
Debtor 1 and Debtor 2 only	Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	☑ Other. Specify	
Check if this claim is for a community debt	Outstanding Debt	
Is the claim subject to offset? No		
✓ No □ Yes		
4.17		\$159.00
Credit Management Control	Last 4 digits of account number	
Nonpriority Creditor's Name 1263 Main Street	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
	☐ Contingent ☐ Unliquidated	
	Disputed	
Green Bay WI 54202 City State ZIP Code		
City State ZIP Code Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce	
Debtor 2 only	that you did not report as priority claims	
Debtor 1 and Debtor 2 only At least one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts	
—	Other. Specify	
Check if this claim is for a community debt	Collecting for - Amigo Energy	
Is the claim subject to offset? ✓ No		
Yes		

Debtor 1 Melissa Ann Ibanez	Case number (if known)	
Part 2: Your NONPRIORITY Unsecur	ed Claims Continuation Page	
After listing any entries on this page, number the previous page.	m sequentially from the	Total claim
4.18		\$219.00
Credit Management LP	Last 4 digits of account number	
Nonpriority Creditor's Name 6080 Tennyson Parkway #100	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
	_ Contingent	
	Unliquidated Disputed	
Plano TX 75024	☐ Disputed	
City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one. Debtor 1 only	☐ Student loans	
Debtor 2 only	Obligations arising out of a separation agreement or divorce	
Debtor 1 and Debtor 2 only	that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	☐ Other. Specify	
☐ Check if this claim is for a community debt	Collecting for - Ambit Energy	
Is the claim subject to offset?		
☑ No □ Yes		
4.19		\$656.00
Credit One Bank	_ Last 4 digits of account number	
Nonpriority Creditor's Name PO Box 98872	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
	_ Contingent	
	Unliquidated Disputed	
Las Vegas NV 89193		
City State ZIP Code Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	Student loans	
Debtor 2 only	 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
Debtor 1 and Debtor 2 only	Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	Other. Specify	
Check if this claim is for a community debt	Credit Card	
Is the claim subject to offset?		
✓ No ☐ Yes		
4.20		\$3,054.45
Domain West Apartments	Last 4 digits of account number	
Nonpriority Creditor's Name c/o Greystar Management	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
611 Dairy Ashford	_ Contingent	
	Unliquidated Disputed	
Houston TX 77079		
City State ZIP Code Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	Student loans Obligations grising out of a congretion agreement or diverse	
Debtor 2 only	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
Debtor 1 and Debtor 2 only	Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	Other. Specify	
Check if this claim is for a community debt	Defaulted Residential Leasehold	
Is the claim subject to offset?		
✓ No ☐ Yes		

Debtor 1 Melissa Ann Ibanez	Case number (if known)	
Part 2: Your NONPRIORITY Unsecu	red Claims Continuation Page	
After listing any entries on this page, number the previous page.	m sequentially from the	Total claim
4.21		\$549.00
EMoney USA	Last 4 digits of account number 7 3 2 9	
Nonpriority Creditor's Name 8700 Stateline Road	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
	☐ Contingent ☐ Unliquidated ☐ Unliquidated ☐ Contingent	
	□ Disputed	
Leawood KS 66206 City State ZIP Code	Type of NONERIORITY unsecured claim:	
Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim: Student loans	
Debtor 1 only	Obligations arising out of a separation agreement or divorce	
Debtor 2 only Debtor 1 and Debtor 2 only	that you did not report as priority claims	
At least one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify	
Check if this claim is for a community debt	Outstanding Debt	
Is the claim subject to offset?	-	
✓ No Yes		
4.22		\$453.00
First Premier Bank	Last 4 digits of account number	
Nonpriority Creditor's Name 3820 N. Louise Avenue	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
	_ ☐ Contingent ☐ Unliquidated	
0: 5 !! 00 57407	Disputed	
Sioux Falls SD 57107 City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.	Student loans	
Debtor 1 only	Obligations arising out of a separation agreement or divorce	
Debtor 2 only Debtor 1 and Debtor 2 only	that you did not report as priority claims	
At least one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify	
☐ Check if this claim is for a community debt	Outstanding Debt	
Is the claim subject to offset?		
✓ No ☐ Yes		
4.23		\$169.00
Jefferson Capital Systems, LLC	Last 4 digits of account number	
Nonpriority Creditor's Name 16 McLeland Rd,	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
	☐ Contingent ☐ Unliquidated ☐ Unliquidated ☐ Contingent	
	Disputed	
St Cloud MN 56303 City State ZIP Code	Type of NONDRIORITY uncestured eleims	
Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim: Student loans	
Debtor 1 only	Obligations arising out of a separation agreement or divorce	
Debtor 2 only Debtor 1 and Debtor 2 only	that you did not report as priority claims	
At least one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify	
Check if this claim is for a community debt	Collecting for - Fingerhut	
Is the claim subject to offset?		
No You		
Yes		

Debtor 1 Melissa Ann Ibanez	Case number (if known)	
Part 2: Your NONPRIORITY Unsect	ured Claims Continuation Page	
After listing any entries on this page, number th previous page.	em sequentially from the	Total claim
4.24		\$23.00
Leachman Cardiology	Last 4 digits of account number 4 0 6 0	
Nonpriority Creditor's Name 6624 Fannin St Ste 2780	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
	Contingent	
	☐ Unliquidated ☐ Disputed	
Houston TX 77030		
City State ZIP Code Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce	
Debtor 2 only	that you did not report as priority claims	
Debtor 1 and Debtor 2 only	Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	Other. Specify	
Check if this claim is for a community debt	Medical Service	
Is the claim subject to offset? ✓ No		
Yes		
4.25		\$4.050.40
	Last 4 digits of account number	\$1,050.19
LendUp Pay Day Loans Nonpriority Creditor's Name	When was the debt incurred?	
237 Kearny Street #197 Number Street	As of the date you file, the claim is: Check all that apply.	
Number Street	Contingent	
	Unliquidated	
San Francisco CA 94108	Disputed	
City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.	Student loans	
Debtor 1 only Debtor 2 only	Obligations arising out of a separation agreement or divorce	
Debtor 1 and Debtor 2 only	that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	Other. Specify	
$\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ $	Outstanding Debt	
Is the claim subject to offset?		
☑ No □ Yes		
4.26		\$862.00
Lonestar Hospital Medicine	Last 4 digits of account number 5 0 7 5	
Nonpriority Creditor's Name 1635 N Loop W	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
	Contingent	
	☐ Unliquidated ☐ Disputed	
Houston TX 77008	— — — — — — — — — — — — — — — — — — —	
City State ZIP Code Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce	
Debtor 2 only	that you did not report as priority claims	
Debtor 1 and Debtor 2 only At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another Check if this claim is for a community debt	Other. Specify	
Check if this claim is for a community debt	Medical Service	
Is the claim subject to offset? ✓ No		
Yes		

Debtor 1 Melissa Ann Ibanez	Case number (if known)	
Part 2: Your NONPRIORITY Unsecui	red Claims Continuation Page	
After listing any entries on this page, number the previous page.	m sequentially from the	Total claim
4.27		\$3,763.52
Memorial Herman Hospital	Last 4 digits of account number 9 1 0 1	
Nonpriority Creditor's Name PO Box 301208	When was the debt incurred?	
Number Street Dallas, TX 75303-001	As of the date you file, the claim is: Check all that apply.	
Dallas, 17 7505-001	_ ☐ Contingent ☐ Unliquidated	
	Disputed	
City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one. Debtor 1 only	Student loans	
Debtor 1 only Debtor 2 only	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
Debtor 1 and Debtor 2 only	Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	Other. Specify	
Check if this claim is for a community debt Is the claim subject to offset?	Medical Service	
No No		
Yes		
4.28		\$4,771.00
Memorial Herman Hospital	Last 4 digits of account number 9 6 0 0	
Nonpriority Creditor's Name PO Box 4370	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
	Contingent Unliquidated	
	Disputed	
Houston TX 77210 City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.	Student loans	
Debtor 1 only Debtor 2 only	Obligations arising out of a separation agreement or divorce	
Debtor 1 and Debtor 2 only	that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	Other. Specify	
Check if this claim is for a community debt	Medical Service	
Is the claim subject to offset? No		
Yes		
4.29		* 007.00
Memorial Herman Medical Center	Last 4 digits of account number	\$627.00
Nonpriority Creditor's Name	When was the debt incurred?	
909 Frostwood Drive, Ste. 3:100 Number Street	As of the date you file, the claim is: Check all that apply.	
	_ Contingent	
	☐ Unliquidated ☐ Disputed	
Houston TX 77024 City State ZIP Code		
Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce	
Debtor 2 only Debtor 1 and Debtor 2 only	that you did not report as priority claims	
At least one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify	
Check if this claim is for a community debt	Medical Service	
Is the claim subject to offset?		
✓ No ☐ Yes		
□ ·		

Debtor 1 Melissa Ann Ibanez	Case number (if known)	
Part 2: Your NONPRIORITY Unsecur	ed Claims Continuation Page	
After listing any entries on this page, number then previous page.	n sequentially from the	Total claim
4.30		\$376.70
MoneyLion	Last 4 digits of account number 1 1 1 9	
Nonpriority Creditor's Name 30 West 21st Street 9th Floor	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
	Contingent	
	☐ Unliquidated ☐ Disputed	
New York NY 10010 City State ZIP Code		
Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce	
Debtor 2 only Debtor 1 and Debtor 2 only	that you did not report as priority claims	
At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
☐ Check if this claim is for a community debt	✓ Other. Specify Outstanding Debt	
Is the claim subject to offset?	outstanding post	
☑ No ☐ Yes		
4.31		\$89.00
National Credit Audit Corp Nonpriority Creditor's Name	Last 4 digits of account number	
12770 Ćoit Road #1000	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply. Contingent	
	Unliquidated	
Dallas TX 75251	Disputed	
City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.	☐ Student loans	
Debtor 1 only Debtor 2 only	Obligations arising out of a separation agreement or divorce	
Debtor 1 and Debtor 2 only	that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	Other. Specify	
Check if this claim is for a community debt	Collecting for - Paramount @ Kingwood	
Is the claim subject to offset?		
✓ No ☐ Yes		
4.32		\$31,107.28
Nissan Motor Acceptance Nonpriority Creditor's Name	Last 4 digits of account number 0 0 1	
POB 660577	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
	_	
Dallas TV 75000	Disputed	
Dallas TX 75266 City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.	Student loans	
Debtor 1 only	Obligations arising out of a separation agreement or divorce	
Debtor 2 only Debtor 1 and Debtor 2 only	that you did not report as priority claims	
At least one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify	
Check if this claim is for a community debt	Car Loan Deficiency Balance	
Is the claim subject to offset?	•	
No You		
Yes		

Debtor 1 Melissa Ann Ibanez	Case number (if known)	
Part 2: Your NONPRIORITY Unse	ecured Claims Continuation Page	
After listing any entries on this page, number previous page.	them sequentially from the	Total claim
4.33		\$994.00
Portfolio Recovery Associates, LLC	Last 4 digits of account number	
Nonpriority Creditor's Name 120 Corporate Blvd., Ste. 100	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
	Contingent	
	Unliquidated Disputed	
Norfolk VA 25302		
City State ZIP Code Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce	
Debtor 2 only	that you did not report as priority claims	
Debtor 1 and Debtor 2 only At least one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Other. Specify Callacting for Spert Authority/Comparity Bank	
Is the claim subject to offset?	Collecting for - Sport Authority/Comenity Bank	
✓ No		
Yes		
4.34		4
	Lock A divite of account number	\$711.00
Portfolio Recovery Associates, LLC Nonpriority Creditor's Name	Last 4 digits of account number When was the debt incurred?	
120 Corporate Blvd., Ste. 100		
Number Street	As of the date you file, the claim is: Check all that apply. Contingent	
	Unliquidated	
Norfolk VA 25302	Disputed	
City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.	☐ Student loans	
Debtor 1 only Debtor 2 only	Obligations arising out of a separation agreement or divorce	
Debtor 2 only Debtor 1 and Debtor 2 only	that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	Other. Specify	
$\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ $		
Is the claim subject to offset?		
No Vos		
Yes		
4.35		\$566.00
Portfolio Recovery Associates, LLC	Last 4 digits of account number	
Nonpriority Creditor's Name 120 Corporate Blvd., Ste. 100	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
	Contingent	
	☐ Unliquidated ☐ Disputed	
Norfolk VA 25302	_	
City State ZIP Code Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	 Student loans Obligations arising out of a separation agreement or divorce 	
Debtor 2 only	that you did not report as priority claims	
Debtor 1 and Debtor 2 only At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another Check if this claim is for a community de	Other. Specify	
Check if this claim is for a community de	Collecting for - Express	
Is the claim subject to offset? No		
Yes		

Debtor 1 Melissa Ann Ibanez	Case number (if known)	
Part 2: Your NONPRIORITY Unsecu	red Claims Continuation Page	
After listing any entries on this page, number the previous page.	m sequentially from the	Total claim
4.36		\$996.00
Portfolio Recovery Associates, LLC	Last 4 digits of account number	<u> </u>
Nonpriority Creditor's Name 120 Corporate Blvd., Ste. 100	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
	_ ☐ Contingent ☐ Unliquidated	
Norfolk VA 25302	Disputed	
City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one. Debtor 1 only	Student loans	
Debtor 2 only	 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
Debtor 1 and Debtor 2 only At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
Check if this claim is for a community debt	Other. Specify	
Is the claim subject to offset?	Collecting for - J.Jill	
☑ No		
Yes		
4.37		\$738.00
Portfolio Recovery Associates, LLC Nonpriority Creditor's Name	Last 4 digits of account number	
120 Corporate Blvd., Ste. 100	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply. Contingent	
	Unliquidated	
Norfolk VA 25302	Disputed	
City State ZIP Code Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one. Debtor 1 only	Student loans Obligations origing out of a congretion agreement or diverse	
Debtor 2 only	 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
Debtor 1 and Debtor 2 only At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
☐ Check if this claim is for a community debt		
Is the claim subject to offset?	Collecting for Forma	
No You		
Yes		
4.38		\$1,192.00
Portfolio Recovery Associates, LLC Nonpriority Creditor's Name	Last 4 digits of account number	
120 Corporate Blvd., Ste. 100	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
	□ Contingent □ Unliquidated	
Norfolk VA 25302	Disputed	
City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one. Debtor 1 only	Student loans	
Debtor 2 only	 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
Debtor 1 and Debtor 2 only	Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another Check if this claim is for a community debt	Other. Specify	
Check if this claim is for a community debt Is the claim subject to offset?	Collecting for - Lane Bryant/Comnity	
No		
Yes		

Debtor 1 Melissa Ann Ibanez	Case number (if known)	
Part 2: Your NONPRIORITY Unsecu	red Claims Continuation Page	
After listing any entries on this page, number the previous page.	em sequentially from the	Total claim
4.39		\$1,155.76
Portfolio Recovery Associates, LLC	Last 4 digits of account number	
Nonpriority Creditor's Name 120 Corporate Blvd., Ste. 100	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
	Contingent	
	☐ Unliquidated ☐ Disputed	
Norfolk VA 25302 City State ZIP Code		
City State ZIP Code Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce	
Debtor 2 only	that you did not report as priority claims	
Debtor 1 and Debtor 2 only At least one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts	
Check if this claim is for a community debt	✓ Other. Specify	
Is the claim subject to offset?	Collecting for - Citibank/BB	
No No		
Yes		
4.40		*
	Last A Paris of account wombon	\$1,165.00
Portfolio Recovery Associates, LLC Nonpriority Creditor's Name	Last 4 digits of account number	
120 Corporate Blvd., Ste. 100	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply. Contingent	
	Unliquidated	
Norfalk VA 25202	Disputed	
Norfolk VA 25302 City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.	Student loans	
Debtor 1 only	Obligations arising out of a separation agreement or divorce	
Debtor 2 only Debtor 1 and Debtor 2 only	that you did not report as priority claims	
At least one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify	
Check if this claim is for a community debt	Collecting for - Ann Taylor/Comenity	
Is the claim subject to offset?		
☑ No		
Yes		
4.41		\$2,000.00
Power Finance Group	Last 4 digits of account number 5 9 2 7	
Nonpriority Creditor's Name	When was the debt incurred?	
8807 W Sam Houston Pkwy N, Ste 200 Number Street	As of the date you file, the claim is: Check all that apply.	
	_ Contingent	
	Unliquidated	
Houston TX 77040	─ ☐ Disputed	
City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one. Debtor 1 only	Student loans	
Debtor 2 only	Obligations arising out of a separation agreement or divorce	
Debtor 1 and Debtor 2 only	that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	☑ Other. Specify	
Check if this claim is for a community debt	Outstanding Debt	
Is the claim subject to offset?		
✓ No ☐ Yes		
—		

Debtor 1 Melissa Ann Ibanez	Case number (if known)	
Part 2: Your NONPRIORITY Unsecu	red Claims Continuation Page	
After listing any entries on this page, number the previous page.	em sequentially from the	Total claim
4.42		\$1,512.00
RISE Credit	Last 4 digits of account number	
Nonpriority Creditor's Name 4150 International Plaza, Ste 300	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
	— ☐ Unliquidated — ☐ Disputed	
Fort Worth TX 76109-4819 City State ZIP Code	Type of NONDRIGHTY uncoquired eleims	
Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim: Student loans	
Debtor 1 only	Obligations arising out of a separation agreement or divorce	
Debtor 2 only Debtor 1 and Debtor 2 only	that you did not report as priority claims	
At least one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify	
Check if this claim is for a community debt	Outstanding Debt	
Is the claim subject to offset?		
✓ No Yes		
4.43		\$350.00
Singleton Assoc.	Last 4 digits of account number 0 0 6 3	4000.00
Nonpriority Creditor's Name	When was the debt incurred?	
PO Box 205214 Number Street	As of the date you file, the claim is: Check all that apply.	
	Contingent	
	☐ Unliquidated ☐ ☐ Disputed	
Dallas TX 75320		
City State ZIP Code Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce	
Debtor 2 only Debtor 1 and Debtor 2 only	that you did not report as priority claims	
At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
☐ Check if this claim is for a community debt		
Is the claim subject to offset?	inducti del vide	
☑ No		
Yes		
4.44		\$382.00
Speedy Cash/IVY Funding Eight, LLC Nonpriority Creditor's Name	Last 4 digits of account number	
22 W. Bryan Street, Ste. 208	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
Savannah OA 24404	Disputed	
Savannah GA 31401 City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.	Student loans	
Debtor 1 only Debtor 2 only	Obligations arising out of a separation agreement or divorce	
Debtor 1 and Debtor 2 only	that you did not report as priority claims	
At least one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify	
☐ Check if this claim is for a community debt	Outstanding Debt	
Is the claim subject to offset?		
✓ No Yes		

Debtor 1 Melissa Ann Ibanez	Case number (if known)	
Part 2: Your NONPRIORITY Unse	cured Claims Continuation Page	
After listing any entries on this page, number previous page.	them sequentially from the	Total claim
4.45		\$1,005.57
Spotloan/Blue Chip Financial	Last 4 digits of account number	
Nonpriority Creditor's Name	When was the debt incurred?	
P.O. Box 720 Number Street	As of the date you file, the claim is: Check all that apply.	
	Contingent	
	Unliquidated	
Belcourt ND 58316	Disputed	
City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.	☐ Student loans	
Debtor 1 only Debtor 2 only	Obligations arising out of a separation agreement or divorce	
Debtor 1 and Debtor 2 only	that you did not report as priority claims	
At least one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify	
☐ Check if this claim is for a community del		
Is the claim subject to offset?	, and the second	
✓ No ☐ Yes		
4.46		\$1,607.01
Verizon Wireless	Last 4 digits of account number 0 0 1	
Nonpriority Creditor's Name PO Box 489	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
	Contingent	
	Unliquidated Disputed	
Newark NJ 07101		
City State ZIP Code Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	Student loans	
Debtor 2 only	 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
Debtor 1 and Debtor 2 only	Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	Other. Specify	
Check if this claim is for a community del	Outstanding Debt	
Is the claim subject to offset?		
✓ No ☐ Yes		
4.47		\$157.00
Waypoint Resource Group	Last 4 digits of account number	
Nonpriority Creditor's Name PO Box 8588	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
	Contingent	
	Unliquidated	
Round Rock TX 78683	Disputed	
City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.	Student loans	
Debtor 1 only Debtor 2 only	Obligations arising out of a separation agreement or divorce	
Debtor 1 and Debtor 2 only	that you did not report as priority claims	
At least one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify	
Check if this claim is for a community del		
Is the claim subject to offset?	•	
✓ No ☐ Yes		
□ . • •		

Debtor 1 Melissa Ann Ibanez	Case number (if known)	
Part 2: Your NONPRIORITY Unsecu	red Claims Continuation Page	
After listing any entries on this page, number the previous page.	em sequentially from the	Total claim
4.48		\$44.00
West Houston Radiology Associates	Last 4 digits of account number	
Nonpriority Creditor's Name 4201 Southwest Fwy.	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
	□ Contingent □ Unliquidated	
	— ☐ Disputed	
Houston TX 77027 City State ZIP Code	— Taras of NONDRIORITY are a count of a large	
Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim: Student loans	
Debtor 1 only	☐ Obligations arising out of a separation agreement or divorce	
Debtor 2 only Debtor 1 and Debtor 2 only	that you did not report as priority claims	
At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
☐ Check if this claim is for a community debt	✓ Other. Specify Medical Service	
Is the claim subject to offset?		
☑ No		
Yes		
4.49		\$2,035.69
Zoca Loans	Last 4 digits of account number 0 3 6 6	
Nonpriority Creditor's Name PO Box 1147	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
	Contingent	
	☐ Unliquidated ☐ ☐ Disputed	
Mission SD 57555 City State ZIP Code		
Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce	
Debtor 2 only	that you did not report as priority claims	
Debtor 1 and Debtor 2 only At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
Check if this claim is for a community debt		
Is the claim subject to offset?	Outstanding Debt	
No No		
Yes		

Debtor 1	Melissa Ann Ibanez	!	Case number (if known)
Part 3:	List Others to B	e Notified Abo	out a Debt That You Already Listed
For ex credit debts	kample, if a collection agor in Parts 1 or 2, then I	gency is trying to ist the collection 1 or 2, list the ac	otified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. to collect from you for a debt you owe to someone else, list the original n agency here. Similarly, if you have more than one creditor for any of the dditional creditors here. If you do not have additional parties to be notified for bmit this page.
AD Astra			On which entry in Part 1 or Part 2 did you list the original creditor?
Name	st 21st Street North, #	200	Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number	Street	200	Collecting for - Speedy Cash/IVY Funding Eight,
			— Last 4 digits of account number
Wichita City	KS State	67205 ZIP Code	<u> </u>
Akron Bil	ling Center		On which entry in Part 1 or Part 2 did you list the original creditor?
	ge Park Drive Street		Line of (Check one): Part 1: Creditors with Priority Unsecured Claims Collecting for - Memorial Part 2: Creditors with Nonpriority Unsecured Claims Herman Hospital
Akron City	OH State	44333 ZIP Code	Last 4 digits of account number 2 6 6 7
Comenity Name	/ Bank		On which entry in Part 1 or Part 2 did you list the original creditor?
PO Box 6	59569		Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number	Street		Part 2: Creditors with Nonpriority Unsecured Claims
			Last 4 digits of account number
San Anto City	nio TX State	78265 ZIP Code	
Enhanced Name	d Recovery Corp.		On which entry in Part 1 or Part 2 did you list the original creditor?
PO Box 5			Lineof (Check one): Part 1: Creditors with Priority Unsecured Claims
Number	Street		Collecting for - AT&T Part 2: Creditors with Nonpriority Unsecured Claims Mobility
 		20044	— Last 4 digits of account number
Jacksony City	rille FL State	32241 ZIP Code	
Equifax Name			On which entry in Part 1 or Part 2 did you list the original creditor?
	chtree Street NE		Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number	Street		Part 2: Creditors with Nonpriority Unsecured Claims
Atlanta	GA	30309	Last 4 digits of account number
City	State	ZIP Code	

Debtor 1 Melissa	Ann Ibanez		Case number (if known)				
Part 3: List Ot	hers to Be	Notified Abo	ut a Debt That You Already Listed Continuation Page				
Experian			On which entry in Part 1 or Part 2 did you list the original creditor?				
Name 475 Anton Blvd.			Line of (Check one): Part 1: Creditors with Priority Unsecured Claims				
Number Street			Part 2: Creditors with Nonpriority Unsecured Claims				
			— Last 4 digits of account number				
Costa Mesa City	CA State	92626 ZIP Code	_				
Olly	Oldio	211 0000					
HRRG			On which entry in Part 1 or Part 2 did you list the original creditor?				
Name PO Box 8486			Line of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims				
Number Street			Collection for ACC				
			Part 2: Creditors with Nonpriority Unsecured Claims Primary Care Phys PA				
			Last 4 digits of account number				
Coral Springs	FL	33075	<u> </u>				
City	State	ZIP Code					
HRRG			On which entry in Part 1 or Part 2 did you list the original creditor?				
Name			_				
PO Box 8486 Number Street			Line of (Check one): Part 1: Creditors with Priority Unsecured Claims				
			Collecting for -Lonestar — Part 2: Creditors with Nonpriority Unsecured Claims — Hospital Medicine				
			— Last 4 digits of account number 5 0 7 5				
Coral Springs	FL	33075					
City	State	ZIP Code					
Internal Revenue Se	rvico		On which entry in Part 1 or Part 2 did you list the original creditor?				
Name	il VICE						
P O Box 7346 Number Street			Lineof (Check one):				
- Street			Part 2: Creditors with Nonpriority Unsecured Claims				
			Last 4 digits of account number				
Philadelphia City	PA State	19101-7346 ZIP Code					
Oily	State	Zii Code					
Jma & Associates			On which entry in Part 1 or Part 2 did you list the original creditor?				
Name 21041 Heron Way			Line of (Check one): Part 1: Creditors with Priority Unsecured Claims				
Number Street			_ <u> </u>				
			Collecting for - Power — Finance Texas Part 2: Creditors with Nonpriority Unsecured Claims				
Lakavilla	MAI	55044	— Last 4 digits of account number <u>5</u> <u>9</u> <u>2</u> <u>7</u>				
<u>City</u>	MN State	ZIP Code	_				
Kingwood Hospital			On which entry in Part 1 or Part 2 did you list the original creditor?				
Name 22999 US Hwy 59 N			Line of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims				
Number Street			Part 2: Creditors with Nonpriority Unsecured Claims				
			, , , , , , , , , , , , , , , , , ,				
	T \/	77000	— Last 4 digits of account number				
Kingwood City	TX State	77339 ZIP Code	_				

Melissa Ann	ibanez	4			Case	e number (if known)
Part 3: List Other	s to B	e Notified Abo	ut a Debt That	You Already	/ Li:	sted Continuation Page
LVNV Funding, LLC			On which entry	y in Part 1 or F	art 2	2 did you list the original creditor?
Name PO Box 10497			Line of	(Check one):		Part 1: Creditors with Priority Unsecured Claims
Number Street		Collecting for One Bank			Part 2: Creditors with Nonpriority Unsecured Claims	
			— Last 4 digits of	f account num	ber	
Greenville	SC	29603	_			
City	State	ZIP Code				
Methodist			On which entry	y in Part 1 or F	art 2	2 did you list the original creditor?
Name PO Box 4701			Line of	(Check one):	П	Part 1: Creditors with Priority Unsecured Claims
Number Street				(Part 2: Creditors with Nonpriority Unsecured Claims
					Ш	Tart 2. Gradiers with Worlphority Grideoured Glaims
			 Last 4 digits of 	f account num	ber	
Houston	TX State	77210-4701 ZIP Code				
City	State	ZIF Code				
MIDLAND FUNDING LLO			On which entry	y in Part 1 or F	Part 2	2 did you list the original creditor?
PO Box 2011			Line of	(Check one):	П	Part 1: Creditors with Priority Unsecured Claims
Number Street			Collecting for One Bank	r - Credit		Part 2: Creditors with Nonpriority Unsecured Claims
			— Last 4 digits of	f account num	ber	
Warren	MI	48090	_			
City	State	ZIP Code				
NCB Management Servi	ices, In	C.	On which entry	y in Part 1 or F	art 2	2 did you list the original creditor?
Name One Allied Drive			Line of	(Check one):	П	Part 1: Creditors with Priority Unsecured Claims
Number Street			Collecting for Credit		_	Part 2: Creditors with Nonpriority Unsecured Claims
			— Last 4 digits of	f account num	ber	
Trevose	PA	19053	_			
City	State	ZIP Code				
Rausch Sturm			On which entry	y in Part 1 or F	art 2	2 did you list the original creditor?
Name c/o Atty. John Kettler			Line of	(Check one):	П	Part 1: Creditors with Priority Unsecured Claims
Number Street	. 04- 1) F O	Attorney for -	- Portfolio		Part 2: Creditors with Nonpriority Unsecured Claims
15660 N Dallas Parkway	, Ste. 3	350	— Recovery As:	socs. LLC	Ч	,,
			— Last 4 digits of	f account num	ber	
Dallas City	TX State	75248 ZIP Code				
City	Olato	211 0000				
SCS			On which entry	y in Part 1 or F	art 2	2 did you list the original creditor?
Name 7170 Cherry Park Drive			Line of	(Check one):		Part 1: Creditors with Priority Unsecured Claims
Number Street			Collecting for	r - West		Part 2: Creditors with Nonpriority Unsecured Claims
			— Houston Rad	liology	Ч	, , , , , , , , , , , , , , , , , , , ,
	T\/	77005	— Last 4 digits of	f account num	ber	
Houston City	TX State	77095 ZIP Code				

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Debtor 1	Melissa Ann Ibanez	Case number (if known)				
Part 3:	List Others to Be Notified Ab	out a Debt That You Already Listed Continuation Page				
	on Credit Bureau	On which entry in Part 1 or Part 2 did you list the original creditor?				
Number	S Office Park Street Drive, Illovo, 2196	Line of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims				
City	State ZIP Code	Last 4 digits of account number				

Debtor 1	Melissa Ann Ibanez	Case number (if known)		
Part 4:	Add the Amounts for Each Type of Unsecured Claim			

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

				Total claim
Total claims from Part 1	6a.	Domestic support obligations	6a.	\$0.00
	6b.	Taxes and certain other debts you owe the government	6b.	\$0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d. →	\$0.00
	6e.	Total. Add lines 6a through 6d.	6d.	\$0.00
	0,6		01	Total claim
Total claims from Part 2	6f.	Student loans	6f.	\$0.00
	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	^{6i.} ⊀	\$81,187.15
	6j.	Total. Add lines 6f through 6i.	6j.	\$81,187.15

					•	
Fill in this inf	formation to i	dentify your case:				
Debtor 1	Melissa First Name	Ann Middle Name	Ibanez Last Name			
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name			
United States Ba	ankruptcy Court fo	or the: SOUTHERN D	STRICT OF TEXA	<u>.s</u>		
Case number (if known)					☐ Check if this is an amended filing	
Official Form	106G					
Schedule G	: Executor	y Contracts and	d Unexpired I	_eases	12	/15
No. Che ✓ Yes. Fil List separate is for (for example)	eck this box and f I in all of the infor	mation below even if the or company with who icle lease, cell phone).	urt with your other so e contracts or leases n you have the con	are listed o	You have nothing else to report on this form. on Schedule A/B: Property (Official Form 106A/B). ase. Then state what each contract or lease rm in the instruction booklet for more examples of	
Person or	r company with	whom you have the co	ntract or lease	State v	what the contract or lease is for	
Name PO Box	Credit Solution 691 Street	S		Contra	h to Month Rent to Own via Executory Contr ract to be ASSUMED ract is in DEFAULT	act
Name 256 Wes	sive Leasing t Data Drive Street	GA State	31779 ZIP Code	Contra	h to Month Rent to Own via Executory Contr ract to be ASSUMED ract is in DEFAULT	act

UT State **84020** ZIP Code

Draper City

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					_		
F	ill in this info	ormation to ider	ntify your case:				
D	ebtor 1	Melissa	Ann	Ibanez			
		First Name	Middle Name	Last Name			
_	ebtor 2	E: .N	A ** 1 11 A 1				
(5	Spouse, if filing)	First Name	Middle Name	Last Name			
U	nited States Bar	kruptcy Court for the	: SOUTHERN DI	STRICT OF TEXAS			
_	ase number					Check if this is an	
(if	known)				"	amended filing	
					_		
Of	ficial Form	106H					
Sc	hedule H:	Your Codeb	tors				12/15
two nee	married peopleded, copy the	e are filing togethe Additional Page, fill	r, both are equally it out, and number	any debts you may have. Be responsible for supplying contribution the entries in the boxes on me and case number (if kno	orrect information. If ne the left. Attach the Ac	nore space is Iditional Page to this	
1.	Do you have a ✓ No ✓ Yes	any codebtors? (I	f you are filing a joir	nt case, do not list either spous	se as a codebtor.)		
2.		• •		ity property state or territory New Mexico, Puerto Rico, Tex		•	
	☐ No. Go to						
	<u> </u>	your spouse, former	spouse, or legal eq	uivalent live with you at the tir	ne?		
	✓ No ☐ Yes						
3.		list all of your code	btors. Do not inclu	ide your spouse as a codebt	or if your spouse is fil	ing with you. List the	
	person show	n in line 2 again as	a codebtor only if t	hat person is a guarantor or	cosigner. Make sure	you have listed the	

creditor on Schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule G (Official Form 106G). Use Schedule D, Schedule E/F, or Schedule G to fill out Column 2. Column 1: Your codebtor

Column 2: The creditor to whom you owe the debt

Check all schedules that apply:

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Fill in this inform	nation to identify	y your case:					
Debtor 1	Melissa	Ann	lbanez				
Debior 1	First Name	Middle Name	Last Name			— Che	eck if this is:
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name			_ _	An amended filing
()			DISTRICT OF TE	= Y A G	2		A supplement showing postpetition
Case number	ruptcy Court for the:	SOUTHLINE	DISTRICT OF TE		<u> </u>	-	chapter 13 income as of the following date:
(if known)	-						MM / DD / YYYY
Official Form 10	D6I						
Schedule I: Yo	our Income						12/15
include information a about your spouse. I your name and case	bout your spouse. If more space is nee	f you are separ ded, attach a se Answer every q	ated and your spo parate sheet to th	ouse	is not fili	ng with y	spouse is living with you, rou, do not include information any additional pages, write
Fill in your emploinformation.	oyment		Debtor 1				Debtor 2 or non-filing spouse
If you have more job, attach a sepa with information a additional employ	rate page Emplo bout ers.	yment status	☐ Employed✓ Not employed				Employed Not employed
Include part-time,	Occup	ation	Disabled/Uner	npio	yea		_
or self-employed		yer's name					
Occupation may i student or homen applies.	=p.o	yer's address	Number Street				Number Street
			City		State Z	ip Code	City State Zip Code
	How Id	ong employed ti	nere?				
	HOW IC	nig employed ti					
Part 2: Give I	Details About Mo	onthly Incom	e				
Estimate monthly inc			n. If you have noth	ing to	o report fo	or any line	e, write \$0 in the space. Include your
0 .	spouse have more t	han one employe	er, combine the info	ormat	tion for all	employe	rs for that person on the lines below. If
you need more space,	attacii a separate sir	eet to this form.			For Deb	otor 1	For Debtor 2 or non-filing spouse
	ss wages, salary, ars). If not paid monthly			2.		\$0.00	
3. Estimate and list	monthly overtime p	ay.		3.	+	\$0.00	
4. Calculate gross	income. Add line 2	+ line 3.		4.		\$0.00	

Official Form 106l Schedule I: Your Income page 1

Deb	Melissa Ann Ibanez		Case nu	mber (if know	າ)			
			For Debtor 1	For Debto non-filing				
	Copy line 4 here	→ 4.	\$0.00					
5.	List all payroll deductions:							
	5a. Tax, Medicare, and Social Security deductions	5a.	\$0.00					
	5b. Mandatory contributions for retirement plans	5b.	\$0.00					
	5c. Voluntary contributions for retirement plans	5c.	\$0.00					
	5d. Required repayments of retirement fund loans	5d.	\$0.00					
	5e. Insurance	5e.	\$0.00					
	5f. Domestic support obligations	5f.	\$0.00					
	5g. Union dues	5g.	\$0.00					
	5h. Other deductions. Specify:	5h	+\$0.00					
6.	Add the payroll deductions. Add lines $5a + 5b + 5c + 5d + 5g + 5h$.	e + 5f + 6.	\$0.00					
7.	Calculate total monthly take-home pay. Subtract line 6 from	m line 4. 7.	\$0.00					
8.	List all other income regularly received:							
	8a. Net income from rental property and from operating a business, profession, or farm	8a.	\$0.00					
	Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, the total monthly net income.							
	8b. Interest and dividends	8b.	\$0.00					
	8c. Family support payments that you, a non-filing spouse, dependent regularly receive	or a 8c.	\$0.00					
	Include alimony, spousal support, child support, maintenandivorce settlement, and property settlement.	ce,						
	8d. Unemployment compensation	8d.	\$0.00					
	8e. Social Security	8e.	\$0.00					
	8f. Other government assistance that you regularly receive	;						
	Include cash assistance and the value (if known) or any nor cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Progor housing subsidies.							
	Specify: 0n	8f.	\$0.00					
	8g. Pension or retirement income	8g.	\$0.00					
	8h. Other monthly income.	-						
	Specify: See continuation sheet	8h.	+ <u>\$1,660.00</u>					
9.	Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f +	8g + 8h. 9.	\$1,660.00					
10.	Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing	10.	\$1,660.00	+	=	\$1,660.00		
11.	State all other regular contributions to the expenses that you	•	ule J.					
	Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives.							
	Do not include any amounts already included in lines 2-10 or am	ounts that are	not available to pay	expenses liste				
	Specify: N/A				11. +	\$0.00		
12.	Add the amount in the last column of line 10 to the amount in income. Write that amount on the Summary of Your Assets and if it applies.				12.	\$1,660.00 Combined		
12	. Do you expect an increase or decrease within the year after	vou filo thio to	rm?			monthly income		
13.		you me this to	11111 f					
	No.✓ Yes. Explain:Debtor has obtained employment.							
	1							

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Debtor 1	Melissa Ann Ibanez		Case number (if known)					
8h. Other	r Monthly Income (details)		For Debtor 1	For Debtor 2 or non-filing spouse				
	ily Monetary Contribution		\$1,660.00					
N/A			\$0.00					
N/A			\$0.00					
		Totals:	\$1,660.00					

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G	ill in this inform	ation to identify	y your case:			Chock	; if this is:	
	Debtor 1	Melissa First Name	Ann Middle Name	Ibanez Last Nar			an amended filing assumed to supplement showing	postpetition
	Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Nar	me	— c	hapter 13 expenses as ollowing date:	s of the
	United States Bankr	uptcy Court for the:	SOUTHERN DIS	STRICT OF	TEXAS	<u> </u>	/IM / DD / YYYY	_
	Case number (if known)					.,	WI 7 2 2 7 1 1 1 1	
O	fficial Form 10	6J				•		
Sc	chedule J: Yo	ur Expenses	3					12/15
COI	•	more space is nee	eded, attach anothe	er sheet to th		-	y responsible for sup additional pages, wri	
P	Part 1: Descri	be Your Housel	nold					
1.	Is this a joint case	e?						
	No □ Yes	ebtor 2 live in a sep			for Separate Househ	nold of D	Debtor 2.	
2.	Do you have depe	H H	No Yes. Fill out this inf	formation	Dependent's relation		o Dependent's	Does dependent
	Do not list Debtor 7 Debtor 2.	land 🗀	for each dependent		Debtor 1 or Debtor	2	age	live with you? No
	Do not state the de names.	ependents'						Yes No Yes No Yes No Yes No Yes No Yes
								□ No □ No □ Yes
3.	Do your expenses expenses of peop yourself and your	le other than	✓ No ☐ Yes					
P	Part 2: Estima	nte Your Ongoin	ng Monthly Exp	enses				
to		of a date after the l		-	-		lement in a Chapter of the	
	lude expenses paid ch assistance and h		-	-			Your expens	es
4.		ne ownership exper age payments and a					4.	\$0.00
	If not included in		-					
	4a. Real estate ta	axes					4a	\$0.00
	4b. Property, hom	neowner's, or renter's	s insurance				4b	\$0.00
	4c. Home mainte	nance, repair, and u	pkeep expenses				4c	\$0.00
	4d Homeowner's	association or cond	lominium dues				4d	\$0.00

Deb	otor 1 Melissa Ann Ibanez	Case number (if known)	
		Your expens	ses
5.	Additional mortgage payments for your residence, such as home equity loans	5.	\$0.00
6.	Utilities:		
	6a. Electricity, heat, natural gas	6a	\$0.00
	6b. Water, sewer, garbage collection	6b	\$0.00
	6c. Telephone, cell phone, Internet, satellite, and cable services	6c	\$181.00
	6d. Other. Specify: N/A	6d.	\$0.00
7.	Food and housekeeping supplies	7.	\$155.00
8.	Childcare and children's education costs	8.	\$0.00
9.	Clothing, laundry, and dry cleaning	9.	\$75.00
10.	Personal care products and services	10.	\$100.00
11.	Medical and dental expenses	11.	\$175.00
12.	Transportation. Include gas, maintenance, bus or train fare. Do not include car payments.	12.	\$125.00
13.	Entertainment, clubs, recreation, newspapers, magazines, and books	13.	\$25.00
14.	Charitable contributions and religious donations	14.	\$0.00
15.	Insurance.		
	Do not include insurance deducted from your pay or included in lines 4 or 20.		
	15a. Life insurance	15a	\$0.00
	15b. Health insurance	15b	\$1,109.74
	15c. Vehicle insurance	15c	\$0.00
	15d. Other insurance. Specify: N/A	15d	\$0.00
16.	Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: N/A	16.	\$0.00
17.	Installment or lease payments:		
	17a. Car payments for Vehicle 1 N/A	17a	\$0.00
	17b. Car payments for Vehicle 2 N/A	17b.	\$0.00
	17c. Other. Specify: Pet Care	17c.	\$20.00
	17d. Other. Specify: N/A / N/A	17d.	\$0.00
18.	Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).		\$0.00
	N/A		
19.	Other payments you make to support others who do not live with you. Specify: N/A	19.	\$0.00

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Deb	tor 1	Melissa Ann Ibanez	Case number (if known)	
20.		real property expenses not included in lines 4 or 5 of this form or on dule I: Your Income.		
	20a.	Mortgages on other property	20a	\$0.00
	20b.	Real estate taxes	20b	\$0.00
	20c.	Property, homeowner's, or renter's insurance	20c	\$0.00
	20d.	Maintenance, repair, and upkeep expenses	20d	\$0.00
	20e.	Homeowner's association or condominium dues	20e	\$0.00
21.	Other	Specify:	21. +	
22.	Calcu	late your monthly expenses.		
	22a.	Add lines 4 through 21.	22a	\$1,965.74
	22b.	Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J	-2. 22b	
	22c.	Add line 22a and 22b. The result is your monthly expenses.	22c	\$1,965.74
23.	Calcu	late your monthly net income.		
	23a.	Copy line 12 (your combined monthly income) from Schedule I.	23a	\$1,660.00
	23b.	Copy your monthly expenses from line 22c above.	23b. _	\$1,965.74
	23c.	Subtract your monthly expenses from your monthly income. The result is your monthly net income.	23c	(\$305.74)
24.	Do yo	ou expect an increase or decrease in your expenses within the year after y	ou file this form?	
		xample, do you expect to finish paying for your car loan within the year or do your to increase or decrease because of a modification to the terms of your mor		
		No.		
	☑ `	Yes. Explain here: Debtor resides with parent and currently does not pay resider but does incur transporation expenses. Debtor may need to o		

	Melissa First Name	Ann Middle Name	Ibanez Last Name		
Debtor 2	First Name	Middle Name	Last Name		
(Spouse, if fil	ling) First Name	Middle Name	Last Name	_	
United States	s Bankruptcy Court fo	or the: SOUTHERN D	ISTRICT OF TEXAS	_	
Case numbe (if known)	r			☐ Check if amended	
Official Fo	orm 106Sum				
ummary	of Your Asse	ets and Liabilit	ies and Certain S	tatistical Information	12/
Part 1:	Summarize You	r Assets			Your assets Value of what you own
. Schedule	A/B: Property (Official	al Form 106A/B)			ŕ
1a. Copy	y line 55, Total real es	state, from Schedule A	/B		\$0.00
1b. Copy	y line 62, Total persor	nal property, from Sche	edule A/B		\$6,430.99
1c. Copy	y line 63, Total of all p	property on Schedule A	/B		\$6,430.99
	C	ır Liabilities			
Part 2:	Summarize You				
Part 2:	Summarize You				Your liabilities Amount you owe
. Schedule	D: Creditors Who Ha	ave Claims Secured by	Property (Official Form 106 f claim, at the bottom of the	SD) last page of Part 1 of Schedule D	Amount you owe
Schedule 2a. Copy Schedule	D: Creditors Who Hay the total you listed in E/F: Creditors Who I	ave Claims Secured by n Column A, Amount ol Have Unsecured Claim	f claim, at the bottom of the s (Official Form 106E/F)		\$2,474.00
Schedule 2a. Copy Schedule 3a. Copy	D: Creditors Who Ha y the total you listed in E/F: Creditors Who I y the total claims fron	ave Claims Secured by n Column A, Amount of Have Unsecured Claim n Part 1 (priority unsect	f claim, at the bottom of the s (Official Form 106E/F) ured claims) from line 6e of \$	last page of Part 1 of Schedule D	\$2,474.00 \$0.00
Schedule 2a. Copy Schedule 3a. Copy	D: Creditors Who Ha y the total you listed in E/F: Creditors Who I y the total claims fron	ave Claims Secured by n Column A, Amount of Have Unsecured Claim n Part 1 (priority unsect	f claim, at the bottom of the s (Official Form 106E/F) ured claims) from line 6e of \$	last page of Part 1 of Schedule D Schedule E/F	\$2,474.00 \$0.00 \$81,187.15
Schedule 2a. Copy Schedule 3a. Copy 3b. Copy	D: Creditors Who Ha y the total you listed in DE/F: Creditors Who I y the total claims from y the total claims from	ave Claims Secured by n Column A, Amount of Have Unsecured Claim n Part 1 (priority unsect	f claim, at the bottom of the s (Official Form 106E/F) ured claims) from line 6e of secured claims) from line 6j	last page of Part 1 of Schedule D Schedule E/F of Schedule E/F	\$2,474.00 \$0.00
Schedule 2a. Copy Schedule 3a. Copy 3b. Copy	D: Creditors Who Ha y the total you listed in DE/F: Creditors Who I y the total claims from y the total claims from	ave Claims Secured by n Column A, Amount of Have Unsecured Claim n Part 1 (priority unsecu n Part 2 (nonpriority uns	f claim, at the bottom of the s (Official Form 106E/F) ured claims) from line 6e of secured claims) from line 6j	last page of Part 1 of Schedule D Schedule E/F of Schedule E/F	\$2,474.0 \$0.0 \$81,187.1

Schedule J: Your Expenses (Official Form 106J)

Copy your monthly expenses from line 22c of Schedule J.....

\$1,965.74

Del	btor 1	Melissa Ann Ibanez	ase number (if known)
P	art 4:	Answer These Questions for Administrative and Statistica	al Records
6.	Are you	u filing for bankruptcy under Chapters 7, 11, or 13?	
	□ No ☑ Ye	o. You have nothing to report on this part of the form. Check this box and sub s	mit this form to the court with your other schedules.
7.	What ki	ind of debt do you have?	
	far	our debts are primarily consumer debts. Consumer debts are those "incurred mily, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistic pur debts are not primarily consumer debts. You have nothing to report on as form to the court with your other schedules.	cal purposes. 28 U.S.C. § 159.
8.		ne Statement of Your Current Monthly Income: Copy your total current mon Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.	thly income from \$2,787.28
9.	Copy th	ne following special categories of claims from Part 4, line 6 of Schedule E	
			Total claim
	From P	art 4 on Schedule E/F, copy the following:	
	9a. Do	mestic support obligations. (Copy line 6a.)	\$0.00
	9b. Ta	xes and certain other debts you owe the government. (Copy line 6b.)	\$0.00
	9c. Cla	aims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$0.00
	9d. Stu	udent loans. (Copy line 6f.)	\$0.00
		oligations arising out of a separation agreement or divorce that you did not reportly claims. (Copy line 6g.)	ort as \$0.00
	Of Do	hts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+ \$0.00

9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)

9g. Total. Add lines 9a through 9f.

\$0.00

Fill in this in	formation to	idontify your coo		-
	Melissa	identify your case	Ibanez	
Debtor 1	First Name	Ann Middle Name	Last Name	-
Debtor 2				
(Spouse, if filing) First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court fo	or the: SOUTHERN D	ISTRICT OF TEXAS	
Case number				
(if known)				Check if this is an amended filing
Official Form	n 106Dec			_
	•	Individual Debt	tor's Schedules	12/15
			lly responsible for supplying	
	risonment for up gn Below	to 20 years, or both.	18 U.S.C. §§ 152, 1341, 1519	, and 3571.
Did you pay	or agree to pay	someone who is NOT	an attorney to help you fill o	ut bankruptcy forms?
☑ No				
Yes. N	lame of person _			Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).
Under penal true and cor		eclare that I have read	I the summary and schedule	s filed with this declaration and that they are
	sa Ann Ibanez		x	
Melissa A	ınn Ibanez, Debto	or 1	Signature of Debtor 2	

Date **04/04/2019**

MM / DD / YYYY

MM / DD / YYYY

Fill in this in	formation to ic	lentify your c	ase:				
Debtor 1	Melissa	Ann		Ibanez			
	First Name	Middle Name		Last Name			
Debtor 2 (Spouse, if filing) First Name	Middle Name		Last Name			
United States Ba	ankruptcy Court for	the: SOUTHER	N DIST	RICT OF TE	EXAS		
Case number (if known)					_	Check if	
Official Forn	n 107						
	<u>.</u>	Affairs for	Indivi	iduals Fil	ling for Bankruptcy		04/19
Part 1: Gi 1. What is your Married Not marr During the la	ase number (if known was number (if known was about the contract of the contra	own). Answer e	al State	estion. cus and Wh	you live now? ude where you live now. Debtor 2:	additional pag	Dates Debtor 2
Deptor 1:	•		lived t		Same as Debtor 1		lived there Same as Debtor
1803 Wi	llow Point Drive		From	10/2018			From
Number	Street		To _	Present	Number Street		To
IZ:	- J T V	77000 0050					
Kingwo City	od TX Stat	77339-2356 e ZIP Code			City Sta	te ZIP Code	_
Debtor 1	:		Dates lived t	Debtor 1 here	Debtor 2: ☐ Same as Debtor 1		Dates Debtor 2 lived there Same as Debtor
					_		<u> </u>
611 Dair	ry Ashford Road Street		From_	9/2017	Number Street		_ From
Apt. 237			To _	10/2018			To
Houstor	n TX						_
City	Stat	e ZIP Code			City Sta	te ZIP Code	

Debto	or 1 Melissa Ann I	banez			Case nui	mber (if known)	
	Debtor 1:		Dates I lived th	Debtor 1 nere	Debtor 2:		Dates Debtor 2 lived there
					☐ Same as Debte	or 1	Same as Debtor 1
	611 Dairy Ashford	l Road	From	12/2016			From
	Number Street			9/2017	Number Street		То
	Apt. 173			3/2017			
	Houston	TX 7707	9				
	City	State ZIP Co	ode		City	State ZIP Code	
	Debtor 1:		Dates I lived th	Debtor 1 nere	Debtor 2:		Dates Debtor 2 lived there
					☐ Same as Debte	or 1	☐ Same as Debtor 1
	150 Northpark Pla	iza	From	2014			From
	Number Street		To	12/2016	Number Street		То
	Kingwood	TX 7733					
	City	State ZIP Co	ode		City	State ZIP Code	
 	Did you have any incor Fill in the total amount o If you are filing a joint ca No Yes. Fill in the deta	f income you rece ase and you have	eived from all job	s and all bu	sinesses, including par		alendar years?
	V		Debtor 1			Debtor 2	
			Deplor I			Debtor 2	
			Sources of in Check all that		Gross income (before deductions and exclusions	Sources of income Check all that apply.	Gross income (before deductions and exclusions
	January 1 of the curre	-	₩ Wages, co bonuses, ti		\$21,018.18	☐ Wages, commissions, bonuses, tips	
	•		Operating	a business		Operating a business	
For tl	ne last calendar year:		₩ages, co		\$42,133.00	☐ Wages, commissions,	
(Janu	ary 1 to December 31,	<u>2018</u>)	bonuses, to	•		bonuses, tips Operating a business	
		1111					
For tl	he calendar year befor	e that:	₩ Wages, co		\$43,665.00	☐ Wages, commissions,	
(Janu	ary 1 to December 31, _	2017)	bonuses, to	•		bonuses, tips Operating a business	
		1111				_ ,	

Deb	otor 1	Melissa Ann Ibanez	Case number (if known)					
5.	Include i unemplo	receive any other income during this year or the two previous accome regardless of whether that income is taxable. Examples of yment; and other public benefit payments; pensions; rental incombling and lottery winnings. If you are in a joint case and you have.	of other income are alimony; child support; Social Security; ne; interest; dividends; money collected from lawsuits; royalties;					
	List each	source and the gross income from each source separately. Do	not include income that you listed in line 4.					
	✓ No ☐ Yes.	Fill in the details.						
Р	art 3:	List Certain Payments You Made Before You File	ed for Bankruptcy					
6.	Are eith	er Debtor 1's or Debtor 2's debts primarily consumer debts?						
	□ No.	Neither Debtor 1 nor Debtor 2 has primarily consumer deb "incurred by an individual primarily for a personal, family, or ho	• • • • • • • • • • • • • • • • • • • •					
		During the 90 days before you filed for bankruptcy, did you pay	any creditor a total of \$6,825* or more?					
		☐ No. Go to line 7.						
		Yes. List below each creditor to whom you paid a total of \$ total amount you paid that creditor. Do not include parchild support and alimony. Also, do not include payment.	ayments for domestic support obligations, such as					
		* Subject to adjustment on 4/01/22 and every 3 years after tha	t for cases filed on or after the date of adjustment.					
	✓ Yes.	Debtor 1 or Debtor 2 or both have primarily consumer debt	s.					
		During the 90 days before you filed for bankruptcy, did you pay	any creditor a total of \$600 or more?					
		No. Go to line 7.						
		Yes. List below each creditor to whom you paid a total of \$ creditor. Do not include payments for domestic supp Also, do not include payments to an attorney for this	ort obligations, such as child support and alimony.					
7.	Insiders corporati agent, in	1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? s include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; tions of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations is child support and alimony.						
	✓ No ☐ Yes.	List all payments to an insider.						

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Deb	otor 1	Melissa Ann Ibane	ez					_ Case number	r (if known)		
В.		1 year before you file ed an insider?	ed for b	oankruptcy, d	lid yo	ou make ai	ny payment	s or transfer any p	roperty on acco	unt of a	debt that
	Include	payments on debts g	uarante	ed or cosigne	ed by	an insider.					
	☑ No □ Yes	s. List all payments th	at bene	efited an insid	er.						
		1.7									
P	art 4:	Identify Legal	Actior	ns. Reposs	ess	ions. and	d Forecio	sures			
9.	Within List all	1 year before you file such matters, including ations, and contract di	ed for b	pankruptcy, v	vere	you a part	y in any lav	vsuit, court action,		-	_
	□ No ☑ Yes	s. Fill in the details.									
Cas	se title		N	lature of the	case			Court or agency		St	tatus of the case
Poi	rtfolio R	ecovery Associate	es, C	ebt Claim (Case	:		In the Justice C	ourt		— ☑ Pending
LL(C v Meli	ssa Ibanez						Court Name	Dreeinet 4 Die	1	
								Harris County, Number Street	Precinct 4, Pla	ce i	On appeal
Cas	se numbe	r 194100079126						6831 Cypress D	Prive, Ste. #4		☐ Concluded
										7070	
								Spring City		7379 P Code	
								City	State Zi	i Code	
10.	Within	1 year before you file	ed for b	ankruptcy, v	vas a	ny of your	r property r	epossessed, forec	losed, garnished	d, attach	ed,
	•	or levied?									
	Check a	all that apply and fill in	the de	tails below.							
		Go to line 11. S. Fill in the information	on belov	w.							
					De	scribe the	property		Date	Val	ue of the property
Nis	san Mo	tor Acceptance			20	16 Nissaı	n Maxima		2/18/201	9	\$18,800.00
Cred	ditor's Nam	e			_						
	B 66057										
Num	nber Str	eet				-	t happened	acad			
					- 🗹		was reposse was foreclos				
D - '	llaa	-	rv	75066			was forecios was garnish				
Dal City	llas		FX State	75266 ZIP Code	- 🗹		_	d, seized, or levied.			
.,					V	,		. ,			

Deb	otor 1	Melissa Ann Ibanez	Case number (i	f known)					
11.			ptcy, did any creditor, including a bank or financial make a payment because you owed a debt?	institution, set off any	у				
	✓ No ☐ Yes	. Fill in the details.							
12.		Vithin 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of reditors, a court-appointed receiver, a custodian, or another official?							
	✓ No ☐ Yes								
P	art 5:	List Certain Gifts and Con	tributions						
13.	Within 2	2 years before you filed for bankru	ptcy, did you give any gifts with a total value of mor	e than \$600 per perso	on?				
	✓ No ☐ Yes	. Fill in the details for each gift.							
14.	Within 2 to any c		ptcy, did you give any gifts or contributions with a t	otal value of more tha	an \$600				
	✓ No ☐ Yes	. Fill in the details for each gift or co	ntribution.						
P	art 6:	List Certain Losses							
15.	15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling?								
	✓ No ☐ Yes	. Fill in the details.							
P	art 7:	List Certain Payments or 1	ransfers						
16.	anyone	you consulted about seeking bank	tcy, did you or anyone else acting on your behalf pakruptcy or preparing a bankruptcy petition? eparers, or credit counseling agencies for services requ						
	□ No ✓ Yes	. Fill in the details.							
	sse Agui	inaga, Attorney at Law PC	Description and value of any property transferred Bankruptcy Attorney Fees.	Date payment or transfer was made	Amount of payment				
	23 South	west Freeway, Ste. 670		04/04/2019	\$1,500.00				
City	uston	TX 77074 State ZIP Code							
	@aguina il or websit	gaandassociates.com e address							
	nily Mer	mbers ade the Payment, if Not You							

Deb	Debtor 1 Melissa Ann Ibanez			nez	Case number (if known)					
		redit Counse	eling		Description and value of a Credit Counseling Purs		Date payment or transfer was made	Amount of payment		
	37 Ven	ntura Boulev reet	ard, S	uite 205	-		04/04/2019	\$25.00		
Enc City			CA State	91316 ZIP Code				_		
		v.abacuscc. ite address	org/im	ages/Abacus	<u>.</u>					
		embers			_					
		Made the Payme								
17.	Do not	e who promis include any pa	ed to hayment	elp you deal w	otcy, did you or anyone else rith your creditors or to mak you listed on line 16.			perty to		
	☐ Ye	s. Fill in the d	etails.							
18.		-	-		uptcy, did you sell, trade, or se of your business or finar		pperty to anyone, ot	her than		
	Include	both outright	transfe	rs and transfers	made as security (such as g have already listed on this state	ranting of a security interest	or mortgage on your	property).		
	✓ No	s. Fill in the d	etails.							
19.		-	-		ruptcy, did you transfer any called asset-protection device		rust or similar devid	ce of which		
	✓ No □ Ye	s. Fill in the d	etails.							
Pa	art 8:	List Cert	ain Fi	inancial Acc	ounts, Instruments, Sa	afe Deposit Boxes, and	d Storage Units			
20.		-	-	led for bankruped, or transferr	otcy, were any financial acc ed?	ounts or instruments held	in your name, or fo	your		
		. •			or other financial accounts; ce ciations, and other financial in	•	in banks, credit unior	ns, brokerage		
	□ No ✓ Ye	s. Fill in the d	etails.							
_					Last 4 digits of account number	Type of account or instrument	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer		
		merica N.A.						/ A =00 ==1		
<u>Att</u> r		overy Depart	tment		XXXX- <u>9</u> <u>1</u> <u>2</u> <u>3</u>		12/2018	(\$383.53)		
Num		reet				Money market				
<u> 20</u>	PO Box 15284				-	Brokerage				
	mingto	n	DE	19850	_	Other				
City			State	ZIP Code	-					

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Deb	otor 1	Melissa Ann Ibanez	Case number (if known)
21.	-	now have, or did you have within 1 year before you filed for bankruptcy urities, cash, or other valuables?	, any safe deposit box or other depository
	✓ No ☐ Yes	. Fill in the details.	
22.	☑ No	ou stored property in a storage unit or place other than your home withi . Fill in the details.	n 1 year before you filed for bankruptcy?
Р	art 9:	Identify Property You Hold or Control for Someone Else	
23.	-	hold or control any property that someone else owns? Include any pro in trust for someone.	perty you borrowed from, are storing for,
	✓ No ☐ Yes	. Fill in the details.	
Р	art 10:	Give Details About Environmental Information	
For	the purp	ose of Part 10, the following definitions apply:	
	hazardoι	nental law means any federal, state, or local statute or regulation conce is or toxic substance, wastes, or material into the air, land, soil, surface I statutes or regulations controlling the cleanup of these substances, wa	water, groundwater, or other medium,
		ns any location, facility, or property as defined under any environmenta or used to own, operate, or utilize it, including disposal sites.	I law, whether you now own, operate, or
		us material means anything an environmental law defines as a hazardone, hazardous material, pollutant, contaminant, or similar item.	us waste, hazardous substance, toxic
Rep	oort all no	otices, releases, and proceedings that you know about, regardless of w	nen they occurred.
24.	Has any law?	governmental unit notified you that you may be liable or potentially lia	ble under or in violation of an environmental
	✓ No ☐ Yes	. Fill in the details.	
25.	✓ No	ou notified any governmental unit of any release of hazardous material? . Fill in the details.	
26.	_	ou been a party in any judicial or administrative proceeding under any e	nvironmental law? Include settlements and
	✓ No ☐ Yes	. Fill in the details.	

Del	otor 1	Melissa Ann Ibanez		Case number (if known)
Р	art 11:	Give Details About Your Business	or Connections to Ar	ny Business
27.	Within 4	4 years before you filed for bankruptcy, did ss?	you own a business or hav	re any of the following connections to any
		A sole proprietor or self-employed in a trade, A member of a limited liability company (LLC A partner in a partnership An officer, director, or managing executive of An owner of at least 5% of the voting or equit) or limited liability partnershi	
	يت ا	None of the above applies. Go to Part 12. Check all that apply above and fill in the deta	ails below for each business.	
28.		2 years before you filed for bankruptcy, did nicial institutions, creditors, or other parties.		ent to anyone about your business? Include
	□ No □ Yes	s. Fill in the details below.		
Р	art 12:	Sign Below		
tha pro or I	t answers perty by poth. 18	the answers on this <i>Statement of Financial A</i> is are true and correct. I understand that ma fraud in connection with a bankruptcy case U.S.C. §§ 152, 1341, 1519, and 3571.	king a false statement, cor can result in fines up to \$2	ncealing property, or obtaining money or 250,000, or imprisonment for up to 20 years,
		nn Ibanez, Debtor 1	Signature of Debtor 2	
	Date	04/04/2019	Date	
Did	you atta	ch additional pages to Your Statement of Fil	nancial Affairs for Individua	als Filing for Bankruptcy (Official Form 107)?
	No Yes			
Did	you pay	or agree to pay someone who is not an atto	orney to help you fill out ba	nkruptcy forms?
_	No Yes Na	me of person		Attach the Bankruptcy Petition Preparer's Notice,
Ц	103. INA			Declaration, and Signature (Official Form 119).

					•		
Fill in this inf	ormation to i	dentify your case:					
Debtor 1	Melissa First Name	Ann Middle Name	Ibanez				
	riisi name	Middle Name	Last Name				
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name				
United States Ba	nkruptcy Court fo	r the: SOUTHERN DI	STRICT OF	ΓEXAS			
Case number							
(if known)							Check if this is an amended filing
Official Form	108						
		for Individuals	Filing Ur	nder Chant	er 7		12/15
	, intention	TOT III GIVIGUUS	i iiiig Oi	idei Oliapi			12/10
		er chapter 7, you must	fill out this fo	rm if:			
creditors have	claims secured	by your property, or					
■ you have lease	ed personal prop	erty and the lease has	s not expired.				
	hever is earlier,	ourt within 30 days aft unless the court exter			•		_
If two married peo		gether in a joint case, the form.	both are equa	lly responsible	for supplying correct	inforn	nation.
•	-	ossible. If more space and case number (if l		ttach a separate	e sheet to this form.	On the	top of any
Part 1: Lis	et Vour Crodit	ors Who Hold Sec	urad Claim	•			
	itors that you lis ormation below.	ted in Part 1 of Sched	lule D: Credito	rs Who Hold Cl	aims Secured by Prop	perty (Official Form 106D),
Identify the c	reditor and the p	property that is collate		at do you intend perty that secu	d to do with the res a debt?		you claim the property exempt on Schedule C?
Creditor's	Conn Applia	ances, Inc.		Surrender the	property.		No
name:		4.			perty and redeem it.		Yes
Description of property	f TV \$300/PC	\$450	V	Reaffirmation A	Agreement.		
securing debt	:		$\overline{\mathbf{Q}}$		perty and [explain]: reaffirmed for fair r	narke	t value.
Part 2: Lis	t Your Unexp	ired Personal Pro	perty Lease	es			
fill in the informat	ion below. Do r		es. <i>Unexpired</i>	leases are leas	ses that are still in effe	ect; the	eases (Official Form 106G) e lease period has not § 365(p)(2).
Describe you	ır unexpired per	sonal property leases				Will t	his lease be assumed?
Lessor's nam	e: Okin u	s Credit Solutions					No
Description of property:		to Month Rent to O	wn via Exec	utory Contrac	t		Yes

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De	btor 1	Melissa Anı	n Ibanez		Case number (if known)	
	Describ	e your unexp	pired personal property lea	ses		Will this lease be assumed?
	Lessor's	name:	Progressive Leasing			□ No
	Descript property		Month to Month Rent t	to Own via Executory Conti	ract	∀ Yes
	•			dicated my intention about any d lease.	property of my estate th	nat secures a debt and
Χ	/s/ Melis	sa Ann Iban	ez	X		
	Melissa A	nn Ibanez, De	ebtor 1	Signature of Debtor 2		
	Date 04	/04/2019	_	Date		
	MN	1 / DD / YYYY	_	MM / DD / YYYY		

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

- You are an individual filing for bankruptcy, and
- Your debts are primarily consumer debts.
 Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of the Bankruptcy Code:

- Chapter 7 -- Liquidation
- Chapter 11 -- Reorganization
- Chapter 12 -- Voluntary repayment plan for family farmers or fishermen
- Chapter 13 -- Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7: Liquidation

\$75	filing fee administrative fee trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their non-exempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that the even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

- most taxes;
- most student loans:
- domestic support and property settlement obligations;

- most fines, penalties, forfeitures, and criminal restitution obligations; and
- certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

- fraud or theft;
- fraud or defalcation while acting in breach of fiduciary capacity;
- intentional injuries that you inflicted; and
- death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A-1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A-2).

If your income is above the median for your state, you must file a second form--the *Chapter 7 Means Test Calculation* (Official Form 122A-2). The calculations on the form-sometimes called the *Means Test*--deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If your income is more than the median income

for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

+		filing fee administrative fee
	\$1 717	total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

+		filing fee administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

+		filing fee administrative fee
-	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

- domestic support obligations,
- most student loans,
- certain taxes,
- debts for fraud or theft,
- debts for fraud or defalcation while acting in a fiduciary capacity,
- most criminal fines and restitution obligations,
- certain debts that are not listed in your bankruptcy papers,
- certain debts for acts that caused death or personal injury, and
- certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and local rules of the court.

For more information about the documents and their deadlines, go to:

http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

- If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury--either orally or in writing--in connection with a bankruptcy case, you may be fined, imprisoned, or both.
- All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together-called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from:

http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html.

In Alabama and North Carolina, go to:

 $\frac{http://www.uscourts.gov/FederalCourts/Bankruptcy/Ba$

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

B2030 (Form 2030) (12/15)

UNITED STATES BANKRUPTCY COURT SOUTHERN DISTRICT OF TEXAS HOUSTON DIVISION

n	re Melissa Ann Ibanez	C	ase No.		
		CI	hapter	7	
	DISCLOSURE OF COMPENS	ATION OF ATTORNE	Y FOF	R DEBTOR	
۱.	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 201 that compensation paid to me within one year before th services rendered or to be rendered on behalf of the de is as follows:	e filing of the petition in bankru	uptcy, or	agreed to be paid to me, for	
	For legal services, I have agreed to accept	Hourly: Estimated Total	\$	1,500.00	
	Prior to the filing of this statement I have received		\$	1,500.00	
	Balance Due	Hourly: Approximately		\$0.00	
2.	The source of the compensation paid to me was:				
	☐ Debtor ☑ Other (specify) Family Moneta	ry Contribution			
3.	The source of compensation to be paid to me is:				
	☑ Debtor ☑ Other (specify)				
1.	I have not agreed to share the above-disclosed co associates of my law firm.	mpensation with any other per	son unle	ess they are members and	
	I have agreed to share the above-disclosed competassociates of my law firm. A copy of the agreement compensation, is attached.				
5.	In return for the above-disclosed fee, I have agreed to	render legal service for all asp	ects of th	ne bankruptcy case, including	:
	a. Analysis of the debtor's financial situation, and rende bankruptcy;	ering advice to the debtor in de	eterminin	ng whether to file a petition in	
	b. Preparation and filing of any petition, schedules, star	tements of affairs and plan wh	ich may	be required;	
	c. Representation of the debtor at the meeting of credit	tors and confirmation hearing.	and anv	adjourned hearings thereof:	

B2030	(Form	20301	(12/15)
DZ000 1		20001	112/10

6. By agreement with the debtor(s), the above-disclosed fee does not include the following services:

CERTIFICATION

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

04/04/2019	/s/ Jesse Aguinaga	
Date	Jesse Aguinaga	Bar No. 00798026
	Jesse Aguinaga	
	8323 Southwest freeway Suite	670
	Houston Tx 77074	
	Phone: (713) 772-7986 / Fax:	(713) 772-7725

/s/ Melissa Ann Ibanez

Melissa Ann Ibanez

UNITED STATES BANKRUPTCY COURT SOUTHERN DISTRICT OF TEXAS HOUSTON DIVISION

IN RE: Melissa Ann Ibanez CASE NO

CHAPTER 7

VERIFICATION OF CREDITOR MATRIX

	The above named D	Debtor hereby verific	es that the attache	ed list of creditors	s is true and corre	ect to the best of	f his/her
knowle	edge.						

Date	4/4/2019	Signature ₋	/s/ Melissa Ann Ibanez Melissa Ann Ibanez
Date		Signature ₋	

4 Change Energy PO Box 660631 Dallas, TX 75266

500 Fast Cash 515 GSE Miami, OK 74354

ACE Cash Express 1231 Greenway Drive #600 Irving, TX 75038

ACS Primary Care Physicians SW, PA PO Box 1123 Minneapolis MN 55440-1123

AD Astra 8918 West 21st Street North, #200 Wichita, KS 67205

Akron Billing Center 3585 Ridge Park Drive Akron, OH 44333

Aldous & Associates, PLLC 4625 South 2300 East, Holladay, UT 84117

American Webloan 3910 W 6th Avenue #277 Stillwater, OK 74074

AMRE Financial Services 3075 E. Imipoerial Highway #200 Brea, CA 92821 AT&T PO Box 5014 Carol Stream, IL 60197

AT&T Mobility 17000 Dallas Parkway Ste 104 Dallas, TX 75248

Balance Credit PO Box 4356, Dept. 1557 Houston, TX 77210

Bank of America N.A. Attn: Recovery Department PO Box 15284 Wilmington, DE 19850

Bank of Missouri/Total Visa 5109 S Broadband Lane Sioux Fallas, SD 57109

Basepoint HM 3225 Northstar Circle Louisville, TN 37777

Bay Area Credit Service PO Box 467600 Atlanta, GQ+A 31146

Cash for Whatever 6160 N Cicero Chicago IL 60646

Cash Net USA 200 W Jackson Blvd. Chicago, IL 60606 Comenity Bank PO Box 659569 San Antonio, TX 78265

Conn Appliances, Inc. 3295 College Street Beaumont, TX 77701

Credit Management Control 1263 Main Street Green Bay, WI 54202

Credit Management LP 6080 Tennyson Parkway #100 Plano, TX 75024

Credit One Bank PO Box 98872 Las Vegas, NV 89193

Domain West Apartments c/o Greystar Management 611 Dairy Ashford Houston, TX 77079

EMoney USA 8700 Stateline Road Leawood, KS 66206

Enhanced Recovery Corp. PO Box 57547 Jacksonville, FL 32241

Equifax 1550 Peachtree Street NE Atlanta, GA 30309 Experian 475 Anton Blvd. Costa Mesa, CA 92626

First Premier Bank 3820 N. Louise Avenue Sioux Falls, SD 57107

HRRG PO Box 8486 Coral Springs, FL 33075

Internal Revenue Service P O Box 7346 Philadelphia PA 19101-7346

Jefferson Capital Systems, LLC 16 McLeland Rd, St Cloud, MN 56303

Jma & Associates 21041 Heron Way Lakeville, MN 55044

Kingwood Hospital 22999 US Hwy 59 N Kingwood, TX 77339

Leachman Cardiology 6624 Fannin St Ste 2780 Houston, TX 77030

LendUp Pay Day Loans 237 Kearny Street #197 San Francisco, CA 94108 Lonestar Hospital Medicine 1635 N Loop W Houston, TX 77008

LVNV Funding, LLC PO Box 10497 Greenville, SC 29603

Memorial Herman Hospital PO Box 301208 Dallas, TX 75303-001

Memorial Herman Hospital PO Box 4370 Houston, TX 77210

Memorial Herman Medical Center 909 Frostwood Drive, Ste. 3:100 Houston, TX 77024

Methodist PO Box 4701 Houston, TX 77210-4701

MIDLAND FUNDING LLC PO Box 2011 Warren, MI 48090

MoneyLion 30 West 21st Street 9th Floor New York, NY 10010

National Credit Audit Corp 12770 Coit Road #1000 Dallas, TX 75251 NCB Management Services, Inc. One Allied Drive Trevose, PA 19053

Nissan Motor Acceptance POB 660577 Dallas, TX 75266

Okinus Credit Solutions PO Box 691 Pelham, GA 31779

Portfolio Recovery Associates, LLC 120 Corporate Blvd., Ste. 100 Norfolk VA 25302

Power Finance Group 8807~W Sam Houston Pkwy N, Ste 200 Houston, TX 77040

Progressive Leasing 256 West Data Drive Draper, UT 84020

Rausch Sturm c/o Atty. John Kettler 15660 N Dallas Parkway, Ste. 350 Dallas, TX 75248

RISE Credit 4150 International Plaza, Ste 300 Fort Worth, TX 76109-4819

SCS 7170 Cherry Park Drive Houston, TX 77095 Singleton Assoc. PO Box 205214 Dallas, TX 75320

Speedy Cash/IVY Funding Eight, LLC 22 W. Bryan Street, Ste. 208 Savannah, GA 31401

Spotloan/Blue Chip Financial P.O. Box 720 Belcourt, ND 58316

TransUnion Credit Bureau Wanderers Office Park 52 Corlett Drive, Illovo, 2196

US Trustee Office of the US Trustee 515 Rusk Ave., Houston, TX 77002

Verizon Wireless PO Box 489 Newark, NJ 07101

Waypoint Resource Group PO Box 8588 Round Rock, TX 78683

West Houston Radiology Associates 4201 Southwest Fwy. Houston, TX 77027

Zoca Loans PO Box 1147 Mission, SD 57555 Jesse Aguinaga, Bar No. 00798026 Jesse Aguinaga 8323 Southwest freeway Suite 670 Houston Tx 77074 (713) 772-7986 Attorney for the Petitioner

UNITED STATES BANKRUPTCY COURT FOR THE

SOUTHERN DISTRICT OF TEXAS HOUSTON DIVISION

In re:	Case No.:
Melissa Ann Ibanez	SSN: <u>xxx-xx-9123</u>
	SSN:
Debtor(s)	Numbered Listing of Creditors
Address:	9
1803 Willow Point Drive Kingwood, TX 77339-2356	Chapter: 7
Killgwood, 1X 77559-2550	

	Creditor name and mailing address	Category of claim	Amount of claim
1.	4 Change Energy PO Box 660631 Dallas, TX 75266 xxxxx39.14	Unsecured Claim	
2.	500 Fast Cash 515 GSE Miami, OK 74354 6220	Unsecured Claim	\$800.00
3.	ACE Cash Express 1231 Greenway Drive #600 Irving, TX 75038 8585	Unsecured Claim	\$1,652.10
4.	ACS Primary Care Physicians SW, PA PO Box 1123 Minneapolis MN 55440-1123 xxxx/xxxx/7569	Unsecured Claim	\$1,489.00
5.	AD Astra 8918 West 21st Street North, #200 Wichita, KS 67205	Unsecured Claim	\$0.00
6.	Akron Billing Center 3585 Ridge Park Drive Akron, OH 44333 2667	Unsecured Claim	\$0.00

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	De	ebtor	Case No. (if known)
	Creditor name and mailing address	Category of claim	Amount of claim
7.	Aldous & Associates, PLLC 4625 South 2300 East, Holladay, UT 84117	Unsecured Claim	\$1,911.00
8.	American Webloan 3910 W 6th Avenue #277 Stillwater, OK 74074 3425	Unsecured Claim	\$1,800.00
9.	AMRE Financial Services 3075 E. Imipoerial Highway #200 Brea, CA 92821	Unsecured Claim	\$85.00
10.	AT&T PO Box 5014 Carol Stream, IL 60197 9101	Unsecured Claim	\$81.52
11.	AT&T Mobility 17000 Dallas Parkway Ste 104 Dallas, TX 75248	Unsecured Claim	\$406.00
12.	Balance Credit PO Box 4356, Dept. 1557 Houston, TX 77210 3089	Unsecured Claim	\$1,015.27
13.	Bank of America N.A. Attn: Recovery Department PO Box 15284 Wilmington, DE 19850 5051	Unsecured Claim	\$383.53
14.	Bank of Missouri/Total Visa 5109 S Broadband Lane Sioux Fallas, SD 57109	Unsecured Claim	\$455.00
15.	Basepoint HM 3225 Northstar Circle Louisville, TN 37777	Unsecured Claim	\$1,227.00

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	Debtor		Case No. (if known)
	Creditor name and mailing address	Category of claim	Amount of claim
16.	Bay Area Credit Service PO Box 467600 Atlanta, GQ+A 31146 9297	Unsecured Claim	\$2,267.00
17.	Cash for Whatever 6160 N Cicero Chicago IL 60646	Unsecured Claim	\$1,517.66
18.	Cash Net USA 200 W Jackson Blvd. Chicago, IL 60606 0366	Unsecured Claim	\$1,556.90
19.	Comenity Bank PO Box 659569 San Antonio, TX 78265	Unsecured Claim	\$0.00
20.	Conn Appliances, Inc. 3295 College Street Beaumont, TX 77701	Secured Claim	\$2,474.00
21.	Credit Management Control 1263 Main Street Green Bay, WI 54202	Unsecured Claim	\$159.00
22.	Credit Management LP 6080 Tennyson Parkway #100 Plano, TX 75024	Unsecured Claim	\$219.00
23.	Credit One Bank PO Box 98872 Las Vegas, NV 89193	Unsecured Claim	\$656.00
24.	Domain West Apartments c/o Greystar Management 611 Dairy Ashford Houston, TX 77079	Unsecured Claim	\$3,054.45

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De			Case No. (if known)	
	Creditor name and mailing address	Category of claim	Amount of claim	
25.	EMoney USA 8700 Stateline Road Leawood, KS 66206 7329	Unsecured Claim	\$549.00	
26.	Enhanced Recovery Corp. PO Box 57547 Jacksonville, FL 32241	Unsecured Claim	\$0.00	
27.	Equifax 1550 Peachtree Street NE Atlanta, GA 30309	Unsecured Claim	\$0.00	
28.	Experian 475 Anton Blvd. Costa Mesa, CA 92626	Unsecured Claim	\$0.00	
29.	First Premier Bank 3820 N. Louise Avenue Sioux Falls, SD 57107	Unsecured Claim	\$453.00	
30.	HRRG PO Box 8486 Coral Springs, FL 33075 5075	Unsecured Claim	\$0.00	
31.	HRRG PO Box 8486 Coral Springs, FL 33075	Unsecured Claim	\$0.00	
32.	Internal Revenue Service P O Box 7346 Philadelphia PA 19101-7346	Priority Claim	\$0.00	
33.	Jefferson Capital Systems, LLC 16 McLeland Rd, St Cloud, MN 56303	Unsecured Claim	\$169.00	

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	Debtor		Case No. (if known)	
	Creditor name and mailing address	Category of claim	Amount of claim	
34.	Jma & Associates 21041 Heron Way Lakeville, MN 55044 xxxxx/5927	Unsecured Claim	\$0.00	
35.	Kingwood Hospital 22999 US Hwy 59 N Kingwood, TX 77339	Unsecured Claim	\$0.00	
36.	Leachman Cardiology 6624 Fannin St Ste 2780 Houston, TX 77030 4060	Unsecured Claim	\$23.00	
37.	LendUp Pay Day Loans 237 Kearny Street #197 San Francisco, CA 94108	Unsecured Claim	\$1,050.19	
38.	Lonestar Hospital Medicine 1635 N Loop W Houston, TX 77008 5075	Unsecured Claim	\$862.00	
39.	LVNV Funding, LLC PO Box 10497 Greenville, SC 29603	Unsecured Claim	\$0.00	
40.	Memorial Herman Hospital PO Box 301208 Dallas, TX 75303-001 xxxx/9101	Unsecured Claim	\$3,763.52	
41.	Memorial Herman Hospital PO Box 4370 Houston, TX 77210 9600	Unsecured Claim	\$4,771.00	
42.	Memorial Herman Medical Center 909 Frostwood Drive, Ste. 3:100 Houston, TX 77024	Unsecured Claim	\$627.00	

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	Debtor		Case No. (if known)	
	Creditor name and mailing address	Category of claim	Amount of claim	
43.	Methodist PO Box 4701 Houston, TX 77210-4701	Unsecured Claim	\$0.00	
44.	MIDLAND FUNDING LLC PO Box 2011 Warren, MI 48090	Unsecured Claim	\$0.00	
45.	MoneyLion 30 West 21st Street 9th Floor New York, NY 10010 1119	Unsecured Claim	\$376.70	
46.	National Credit Audit Corp 12770 Coit Road #1000 Dallas, TX 75251	Unsecured Claim	\$89.00	
47.	NCB Management Services, Inc. One Allied Drive Trevose, PA 19053	Unsecured Claim	\$0.00	
48.	Nissan Motor Acceptance POB 660577 Dallas, TX 75266 0001	Unsecured Claim	\$31,107.28	
49.	Portfolio Recovery Associates, LLC 120 Corporate Blvd., Ste. 100 Norfolk VA 25302	Unsecured Claim	\$994.00	
50.	Portfolio Recovery Associates, LLC 120 Corporate Blvd., Ste. 100 Norfolk VA 25302	Unsecured Claim	\$711.00	
51.	Portfolio Recovery Associates, LLC 120 Corporate Blvd., Ste. 100 Norfolk VA 25302	Unsecured Claim	\$566.00	

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	Debto	or	Case No. (if known)
	Creditor name and mailing address	Category of claim	Amount of claim
52.	Portfolio Recovery Associates, LLC 120 Corporate Blvd., Ste. 100 Norfolk VA 25302	Unsecured Claim	\$996.00
53.	Portfolio Recovery Associates, LLC 120 Corporate Blvd., Ste. 100 Norfolk VA 25302	Unsecured Claim	\$738.00
54.	Portfolio Recovery Associates, LLC 120 Corporate Blvd., Ste. 100 Norfolk VA 25302	Unsecured Claim	\$1,192.00
55.	Portfolio Recovery Associates, LLC 120 Corporate Blvd., Ste. 100 Norfolk VA 25302	Unsecured Claim	\$1,155.76
56.	Portfolio Recovery Associates, LLC 120 Corporate Blvd., Ste. 100 Norfolk VA 25302	Unsecured Claim	\$1,165.00
57.	Power Finance Group 8807 W Sam Houston Pkwy N, Ste 200 Houston, TX 77040 xxxx/5927	Unsecured Claim	\$2,000.00
58.	Rausch Sturm c/o Atty. John Kettler 15660 N Dallas Parkway, Ste. 350 Dallas, TX 75248	Unsecured Claim	\$0.00
59.	RISE Credit 4150 International Plaza, Ste 300 Fort Worth, TX 76109-4819	Unsecured Claim	\$1,512.00
60.	SCS 7170 Cherry Park Drive Houston, TX 77095	Unsecured Claim	\$0.00

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	Debtor		Case No. (if known)
	Creditor name and mailing address	Category of claim	Amount of claim
61.	Singleton Assoc. PO Box 205214 Dallas, TX 75320 0063	Unsecured Claim	\$350.00
62.	Speedy Cash/IVY Funding Eight, LLC 22 W. Bryan Street, Ste. 208 Savannah, GA 31401	Unsecured Claim	\$382.00
63.	Spotloan/Blue Chip Financial P.O. Box 720 Belcourt, ND 58316	Unsecured Claim	\$1,005.57
64.	TransUnion Credit Bureau Wanderers Office Park 52 Corlett Drive, Illovo, 2196	Unsecured Claim	\$0.00
65.	US Trustee Office of the US Trustee 515 Rusk Ave., Houston, TX 77002	Priority Claim	
66.	Verizon Wireless PO Box 489 Newark, NJ 07101 0001	Unsecured Claim	\$1,607.01
67.	Waypoint Resource Group PO Box 8588 Round Rock, TX 78683	Unsecured Claim	\$157.00
68.	West Houston Radiology Associates 4201 Southwest Fwy. Houston, TX 77027	Unsecured Claim	\$44.00
69.	Zoca Loans PO Box 1147 Mission, SD 57555 0366	Unsecured Claim	\$2,035.69

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in re: Meilssa Ann Idanez	
Debtor	Case No. (if known)
(The penalty for making a false statement or concealing property is a fine of up to \$500,000 or imprisonment for 18 U.S.C. secs. 152 and 3571.)	up to 5 years or both.
DECLARATION	
I, Melissa Ann Ibanez	,
named as debtor in this case, declare under penalty of perjury that I have read the foregoing Numbered Listin	g of Creditors,
consisting of9 sheets (including this declaration), and that it is true and correct to the best of my information	ation and belief.
Debtor: /s/ Melissa Ann Ibanez Date: 4/4/2019	
Melissa Ann Ibanez	

			dentify your case:			e box only as directin Form 122A-1Su	
Debto	r 1	Melissa First Name	Ann Middle Name	Ibanez Last Name	- 1.There is	no presumption of abus	se.
	se, if filing)		Middle Name	Last Name	of abuse Means T	ulation to determine if a applies will be made un est Calculation (Official	nder Chapter 7 Form 122A-2)
Case (if kno	number wn)					ns Test does not apply ed military service but i	
					Check if t	his is an amended filing	J
Offici	al Form	122A-1					
Chap	ter 7 S	tatement o	f Your Current	Monthly Income			12/1
informa are exe military	ation applie mpted fron service, c Supp) with	es. On the top or in a presumption omplete and file this form.	f any additional pages of abuse because yo	neet to this form. Include the write your name and case u do not have primarily con ion from Presumption of Ab	number (if know) sumer debts or b	n). If you believe that yecause of qualifying	yo u
ı. Wi	nat is your	marital and filing	g status? Check one o	only.			
✓	Not mar	ried. Fill out Colu	ımn A, lines 2-11.				
	Married	and your spous	e is filing with you. Fi	Il out both Columns A and B,	lines 2-11.		
	Married	and your spous	e is NOT filing with yo	ou. You and your spouse ar	e:		
	Livi	ng in the same h	nousehold and are no	t legally separated. Fill out b	oth Columns A and	d B, lines 2-11.	
	dec	lare under penalt	y of perjury that you an	I. Fill out Column A, lines 2-1 d your spouse are legally sep s that do not include evading t	arated under nonb	ankruptcy law that appli	es or that you
ba Au in t	nkruptcy c gust 31. If the result.	ase. 11 U.S.C. the amount of yo Do not include ar	§ 101(10A). For exampur monthly income variby income amount more	ed from all sources, derived ble, if you are filing on Septem ed during the 6 months, add to than once. For example, if b have nothing to report for any	nber 15, the 6-mon he income for all 6 poth spouses own t	th period would be Mard months and divide the he same rental property	total by 6. Fill
					Column A Debtor 1	Column B Debtor 2 or non-filing spouse	
		rages, salary, tip roll deductions).	s, bonuses, overtime	and commissions	\$1,133.33		
	mony and Column B is	•	yments. Do not includ	de payments from a spouse	\$0.00		
ex reg you a s	penses of y gular contrib ur depende	you or your depo outions from an u nts, parents, and	roommates. Include re		\$1,653.95		

Deb	otor 1	Melissa Ann Ibanez			c	ase number (if k	nown)	
						Column A Debtor 1	Column B Debtor 2 or non-filing spouse	
5.	Net inc	come from operating a busine	ess, profession, or	farm				
			Debtor 1	Debtor 2				
	Gross i	receipts (before all ions)	\$0.00					
	Ordinal expens	ry and necessary operating —ses	\$0.00 -		Сору			
		onthly income from a business, sion, or farm	\$0.00		here →	\$0.00		
6.	Net inc	come from rental and other re	eal property					
			Debtor 1	Debtor 2				
	Gross i	receipts (before all ions)	\$0.00					
	Ordinal expens	ry and necessary operating —ses	\$0.00 -		Сору			
		onthly income from rental or eal property	\$0.00		here ->	\$0.00		
7.	Interes	et, dividends, and royalties				\$0.00		
8.	Unemp	oloyment compensation				\$0.00		
		enter the amount if you contenunder the Social Security Act.						
	For	you		\$0.	00			
	For	your spouse						
9.		on or retirement income. Do no penefit under the Social Securi		ount received that		\$0.00		
10.	amoun or payr or inter	e from all other sources not I t. Do not include any benefits nents received as a victim of a national or domestic terrorism. te page and put the total below	received under the war crime, a crime If necessary, list o	Social Security A against humanity	ct ′,			
		mounts from separate pages, i	•				+	
11.	Add lin	ate your total current monthly es 2 through 10 for each colum dd the total for Column A to the	nn.	i.		\$2,787.28	+	= \$2,787.28 Total current monthly income

Debtor 1		М	elissa Ann Ibanez		Case number (if known)		
Р	art 2:		Determine Whether the Means	Test Applies to You			
12.	Calc	ulate	your current monthly income for the y	ear. Follow these steps:			
	12a.	Сор	y your total current monthly income from	line 11	Copy line 11 here > 12a. \$2,787.28		
		Mul	tiply by 12 (the number of months in a ye	ar).	X 12		
	12b.	The	result is your annual income for this part	of the form.	12b. \$33,447.36		
13.	Calcu	ulate	the median family income that applies	to you. Follow these steps:			
	Fill in	the s	state in which you live.	Texas			
	Fill in	the r	number of people in your household.	1			
	Fill in	the r	nedian family income for your state and s	size of household	13. \$50,144.00		
			st of applicable median income amounts s for this form. This list may also be avai				
14.	How	do th	ne lines compare?				
	14a.		Line 12b is less than or equal to line 13 Go to Part 3.	On the top of page 1, check	oox 1, There is no presumption of abuse.		
	14b.		Line 12b is more than line 13. On the to Go to Part 3 and fill out Form 122A-2.	op of page 1, check box 2, The	presumption of abuse is determined by Form 122A-2.		
P	art 3:		Sign Below				
	Bv s	sianir	ng here. I declare under penalty of periury	that the information on this st	atement and in any attachments is true and correct.		
		Ü					
	, , .		elissa Ann Ibanez sa Ann Ibanez, Debtor 1	X Sign	ature of Debtor 2		
	I	Date_	4/4/2019	Date			
	lf	au ab	MM / DD / YYYY ecked line 14a, do NOT fill out or file For	m 122A 2	MM / DD / YYYY		

If you checked line 14b, fill out Form 122A-2 and file it with this form.

Current Monthly Income Calculation Details

7

In re: **Melissa Ann Ibanez**Case Number:
Chapter:

2. Gross wages, salary, tips, bonuses, overtime and commissions.

Debtor or Spouse's Income	Description (if	Description (if available)					
	6 Months Ago	5 Months Ago	4 Months Ago	3 Months Ago	2 Months Ago	Last Month	Avg. Per Month
Debtor	Helm US Che \$6,800.00		\$0.00	\$0.00	\$0.00	\$0.00	\$1,133.33

4. All amounts from any source which are regularly paid for household expenses of you or your dependents, including child support.

Debtor or Spouse's Income	Description (if available)							
	6 Months Ago	5 Months Ago	4 Months Ago	3 Months Ago	2 Months Ago	Last Month	Avg. Per Month	

 Debtor
 Family \$ Contributions/Medical Expenes

 \$0.00
 \$1,259.74
 \$1,284.74
 \$1,534.74
 \$2,709.74
 \$3,134.74
 \$1,653.95

Underlying Allowances (as of 04/04/2019)

In re: **Melissa Ann Ibanez**Case Number:
Chapter: **7**

Median Income Information				
State of Residence	Texas			
Household Size	1			
Median Income per Census Bureau Data	\$50,144.00			

National Standards: Food, Clothing, Household Supplies, Personal Care, and Miscellaneous				
Region	US			
Family Size	1			
Gross Monthly Income	\$2,787.28			
Income Level	Not Applicable			
Food	\$334.00			
Housekeeping Supplies	\$35.00			
Apparel and Services	\$89.00			
Personal Care Products and Services	\$38.00			
Miscellaneous	\$151.00			
Additional Allowance for Family Size Greater Than 4	\$0.00			
Total	\$647.00			

National Standards: Health Care (only applies to cases filed on or after 1/1/08)					
Household members under 65 years of age					
Allowance per member	\$52.00				
Number of members	0				
Subtotal	\$0.00				
Household members 65 years of age or old	Household members 65 years of age or older				
Allowance per member	\$114.00				
Number of members	0				
Subtotal	\$0.00				
Total	\$0.00				

Local Standards: Housing and Utilities			
State Name	Texas		
County or City Name	Harris County		
Family Size	Family of 1		
Non-Mortgage Expenses	\$496.00		
Mortgage/Rent Expense Allowance	\$1,028.00		
Minus Average Monthly Payment for Debts Secured by Home	\$0.00		
Equals Net Mortgage/Rental Expense	\$1,028.00		
Housing and Utilities Adjustment	\$0.00		

Underlying Allowances (as of 04/04/2019)

In re: Melissa Ann Ibanez Case Number: Chapter: 7

Local Standards: Transportation; Vehicle Operation/Public Transportation					
Transportation Region		Houston	Houston		
Number of Vehicles Operated		0	0		
Allowance		\$178.00	\$178.00		
Local	Standards: Transportation	; Additional Publi	c Transportation Expense		
Transportation Region		Not applicable	•		
Allowance (if entitled)		Not applicable	Not applicable		
Amount Claimed		Not applicable	Not applicable		
	Local Standards: Transp	ortation; Ownersl	nip/Lease Expense		
Transportation Region		Houston	Houston		
Number of Vehicles with Owner	ership/Lease Expense	0	0		
	First Car		Second Car		
Allowance					
Minus Average Monthly Payment for Debts Secured by Vehicle					
Equals Net Ownership / Lease Expense					